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DLN: 93493317097945

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A F	or the 2014	calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014			
B C	heck if applica	ble C Name of organization AMERICAN FEDERATION OF STATE COUNTY	1	D Employer	identification number
☐ Ad	ddress change			53-0237	7789
∏ N	ame change	Doing business as			
┌ Ir	iitial return			E Telephone	numher
	nal turn/terminat	Number and street (or P O box if mail is not delivered to street address) Room/suite 1625 L STREET NW		(202)42	
□ Aı	mended return	City or town, state or province, country, and ZIP or foreign postal code		(=== / · · =	
	pplication pen	WASHINGTON, DC 200365687	•	G Gross rece	ipts \$ 145,260,764
		F Name and address of principal officer LEE SAUNDERS	H(a) Is this		turn for
		1625 L STREET NW	subordı	nates	j Yesje No
		WASHINGTON,DC 20036	H(b) Are all		tes
	ax-exempt st	atus	ınclude "No."		list (see instructions)
	Vebsite: ►	www afscme org			n number ►
<u></u>	rm of organiz	ation Corporation Trust ✓ Association Other ►	L Year of form		
		ummary	L real of foline	ation 1932	ri State of legal dofficile D
Governance	THE LAB	ly describe the organization's mission or most significant activities AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLO OR ORGANIZATION REPRESENTING WORKERS IN THE PUBLIC SERVIC tk this box from if the organization discontinued its operations or disposed of	E AND HEALT	H CARE S	SECTORS
	3 Num	ber of voting members of the governing body (Part VI, line 1a)			3 3
Activities &		ber of independent voting members of the governing body (Part VI, line 1b)		_	4
M	5 Tota	I number of individuals employed in calendar year 2014 (Part V, line 2a) .			5 62
्र	6 Tota	I number of volunteers (estimate if necessary)			6
	7a Tota	l unrelated business revenue from Part VIII, column (C), line 12		. [:	7a
	b Net	unrelated business taxable income from Form 990-T, line 34	<u></u>		7ь
			Prior Y	/ear	Current Year
Rayenue	ı	entributions and grants (Part VIII, line 1h)			0
		ogram service revenue (Part VIII, line 2g)	16	4,806,891	
產		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		172,954 6,134,439	
	1	tal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line			
)		1,114,284	
		ants and similar amounts paid (Part IX, column (A), lines 1-3)		8,713,967	_
		nefits paid to or for members (Part IX, column (A), line 4) laries, other compensation, employee benefits (Part IX, column (A), lines			0
\$		10)	7	1,920,438	8 72,159,09
Expenses		ofessional fundraising fees (Part IX, column (A), line 11e)		(0
ਡੋ	b Tot	al fundraising expenses (Part IX, column (D), line 25) ▶0			
	17 Ot	her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6	8,948,670	0 75,783,71
		tal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		9,583,075	
		venue less expenses Subtract line 18 from line 12		1,531,209	9 -14,478,43
Net Assets or Fund Balances			Beginning o Yea		End of Year
3.55 8.55 8.55 8.55	20 To	tal assets (Part X, line 16)		6,234,300	
10 PM	21 To	tal liabilities (Part X, line 26)		9,481,899	
		ignature Block	2	6,752,401	2,648,17
my l	n n	s of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete. Declaration of preparer (other that y knowledge ****** Signature of officer CHARLES JURGONIS DIR FINCL SERVICES Type or print name and title Print/Type preparer's name. Preparer's signature. Dat	n officer) is ba 2015 Date	sed on all	
Pai	id	DAVID P DORSEY DAVID P DORSEY	CHECK		00178158
	eparer	Firm's name ► BOND BEEBE PC	Fırm's	EIN ►	
	e Onlv	Firm's address ► 4600 EAST-WEST HIGHWAY SUITE 900	Phone	no (301) 27	72-6000

BETHESDA, MD 208143423

May the IRS discuss this return with the preparer shown above? (see instructions) .

✓ Yes ☐ No

Par	t III	Statement of Program Serv Check if Schedule O contains a res	vice Accomplishments sponse or note to any line in this Part III		
1	Briefl	y describe the organization's missio	n		
RG FS	SANIZA CME SU	TION REPRESENTING APPROXIM	UNTY AND MUNICIPAL EMPLOYEES ATELY 1,500,000 WORKERS IN THE P COLLECTIVE BARGAINING EFFORTS	UBLIC SERVICE AND HEALTH C	ARE SECTORS
2	the pr	ior Form 990 or 990-EZ?	cant program services during the year w		┌ Yes ┌ No
	If"Ye	s," describe these new services on :	Schedule O		
3		e organization cease conducting, or es?	make significant changes in how it cond	ucts, any program	┌ Yes ┌ No
	If"Ye	s," describe these changes on Sche	dule O		
4	expen		ce accomplishments for each of its three 4) organizations are required to report th r each program service reported		
4a	ORGA	DRTED AFFILIATED LOCAL UNIONS AND DIST	including grants of \$ RICT COUNCILS IN ORGANIZING AND NEGOTIATI ROVIDED RESEARCH SERVICES FOR CONTRACT A SLATION, AND OTHER ISSUES		
4b	(Code	e) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
4c	(Code	e) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
4d		r program services (Describe in Sch enses \$ inc	nedule O) cluding grants of \$) (Revenue \$)
4e		I program service expenses 🕨	· · · · · · · · · · · · · · · · · · ·	·	
		<u> </u>			

			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		No
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 1	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 for escrow or custodial account liability, 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		No
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 $\sqrt{2}$	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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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 $X^{f E}$	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 and XII	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 and XII is optional "D"	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, Parts I and IV	14b		No
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		No
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		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? If "Yes," complete Schedule G, Part I (see instructions)	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? If "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 hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 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 "Yes," complete Schedule L, Part II	26		No
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 entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		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? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
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	Yes	
		F	orm 99 0	(2014)

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 198			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country 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?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5u 5b		No No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
Č	1. 165, to fine 54 of 55, and the organization merorin 0000-1"	5с		
	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?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 a	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	7a		
h	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
d	file Form 8282?	7c		
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		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	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)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	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	or note to any line in this Part VI					.▽

Se	ction 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	1a	34				
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	0				
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			3		Νo	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?						
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation'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 pow more members of the governing body?			7a	Yes		
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b		Νo	
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the				
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, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No	
Se	ction B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	even	ıe Cod	e.)	
					Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes		
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b	Yes		
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	s gov	erning body before filing	11a		No	
b	$ \ Describe in Schedule O the process, if any, used by the organization to review this Facility of the process of the p$	orm 9	90				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 $$.			12a	Yes		
b	Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	ly inte	erests that could give	12b	Yes		
С	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? If "Yes," describe	12 c		No	
13	Did the organization have a written whistleblower policy?			13		Νo	
14	Did the organization have a written document retention and destruction policy? .			14	Yes		
15	Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the					ri	
а	The organization's CEO, Executive Director, or top management official			15a		Νo	
b	O ther officers or key employees of the organization $\ldots \ldots \ldots \ldots$			15b		Νo	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	orsim	ılar arrangement wıth a	16a		Νo	
b	If "Yes," did the organization follow a written policy or procedure requiring the organic participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	e step	s to safeguard the	16b			

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V Upon request Other (explain in Schedule O)
- 19 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 during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records

►CHARLES JURGONIS

1625 L STREET NW

WASHINGTON, DC 20036 (202) 429-1000

Form 990 (2014)	
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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 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 organization nor any related organization compensated any current officer, director, or trustee

any hours for related organizations (W- organizations (W- organizations (W- organization (W- 2/1099-MISC) organization related	(A) Name and Title	for related organizations below		•	` `	organization and
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Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

c Total from continuation sheets to Part VII, Section A	
d Total (add lines 1b and 1c)	1,361,971

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►204

			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee				
	on line 1a? If "Yes," complete Schedule J for such individual	3		No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such				
	ındıvıdual	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for				
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		No	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation			
FREEMAN DECORATING SERVICES INC, 2000 EASTON BLVD DES MOINES, IA 50317	DESIGN & BUILDOUT	2,381,845			
CONVENTION SERVICES UNLIMITED, 1701 CABIN BRANCH DRIVE CHEVERLY, MD 20785	CONVENTION SERVICES	1,166,671			
KELLY PRESS INC, 1701 CABIN BRANCH DRIVE CHEVERLY, MD 20785	PRINTING	1,016,714			
MACK-SUMNER COMMUNICATIONS LLC, 2001 N BEAUREGARD STREET ALEXANDRIA, VA 22311	MEDIA SERVICES	848,919			
BREDHOFF KAISER PLLC, 805 FIFTEENTH STREET NW WASHINGTON, DC 20005	LEGAL SERVICES	654,507			
2 Total number of independent contractors (including but not limited to those listed above) who received more than					

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►31

Part VI	• • •	Statement of Revenue Check if Schedule O contains a	rosponso or not	to any lir	oo in this Bart VIII			
		Check if Schedule O Contains a	response of note	e to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0	1a	Federated campaigns	1a					
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership dues	1b					
373 101								
S, (С	Fundraising events	. 1c					
<u>₹</u> <u>Þ</u>	d	Related organizations	1d					
". ∐⊒."	е	Government grants (contributions)	1e					
<u> </u>	f	All other contributions, gifts, grants, an	d 1f					
를 들		similar amounts not included above						<u> </u>
풀	g	Noncash contributions included in lines 1a-1f \$						
	h	Total. Add lines 1a-1f			o			
اهر				•				
e l	_		Busines					
wen	2a	MEMBERSHIP DUES AND ASSESSMENTS	<u> </u>	900099	138,155,843	138,155,843		
28	Ь	REIMBURSEMENTS		900099	295,328	295,328		
55	С							
<u>₹</u>	d							
<u>"</u> [e							
Program Serwoe Revenue	f	All other program service reven	ue					
<u>&</u>		Total. Add lines 2a-2f		<u> </u>	120 454 474			
-	<u>g</u> 3	Investment income (including d			138,451,171	-		
	,	and other similar amounts).		··, 🕨	180,976			180,97
	4	Income from investment of tax-exemp	ot bond proceeds .	. ▶ [0			
	5	Royalties		▶ [3,472,445			3,472,44
		(ı) Real	(II) Per	rsonal				
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income	0	0				
	d	or (loss) Net rental income or (loss).			0			
	_	(i) Securities						
	7a	Gross amount	(11) 0	ther				
		from sales of assets other						
	_	than inventory						
	Ь	Less cost or other basis and						
	c	sales expenses Gain or (loss)						
	d	Net gain or (loss)			0			
		Gross income from fundraising		· ·►	-			
e l		events (not including						
Other Revenue		\$ of contributions reported on line	1c)					
<u>é</u>		See Part IV, line 18						
_ ds			a					
<u> </u>	b	Less direct expenses						
د	c	Net income or (loss) from fundra		· ►	0			
	9a	Gross income from gaming actives See Part IV, line 19	/ities					
			a					
	b	Less direct expenses	. ь					
		Net income or (loss) from gamir			o			
		Gross sales of inventory, less returns and allowances						
			а					
	b	Less cost of goods sold	ь					
	С	Net income or (loss) from sales			0			
		Miscellaneous Revenue	Busines		4 470 740			1 472
	11a	MISCELLANEOUS		900099	1,172,740			1,172,74
	b	EXPENSE REIMBURSEMENTS		900099	1,983,432			1,983,432
	C							
	d	All other revenue						
	е	Total. Add lines 11a-11d .		►	3,156,172			
	12	Total revenue. See Instructions				400 454 151		6 0
- 1				- [145,260,764	138,451,171		6,809,593

Form 990 (2014)	
Part IX Statement of Functional Expenses	
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations m	ust complete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	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 domestic organizations and domestic governments See Part IV, line 21	11,701,318	•		<u> </u>
2	Grants and other assistance to domestic individuals See Part IV, line 22	95,077			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals 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	3,246,659			
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	43,654,041			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,184,250			
9	Other employee benefits	17,313,155			
10	Payroll taxes	3,760,985			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	1,280,882			
C	Accounting	359,906			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	6,813,156			
12	Advertising and promotion	286,186			
13	Office expenses	8,211,175			
14	Information technology	1,188,539			
15	Royalties	0			
16	Occupancy	3,837,737			
17	Travel	15,446,424			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,774,238			
20	Interest	0			
21	Payments to affiliates	33,572,331			
22 23	Depreciation, depletion, and amortization	747,940 461,425			
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)	461,423			
а	BAD DEBT EXPENSE	308,601			
b	REIMBURSED SALARIES/LOST TIME	172,445			
c	PERSONAL PROPERTY TAXES	164,365			
d	DUES REFUNDS	111,792			
е	All other expenses	46,572			
25	Total functional expenses. Add lines 1 through 24e	159,739,199			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				rm 990 (2014)

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			. .
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	174,400	1	141,745
	2	Savings and temporary cash investments	8,184,521	2	8,408,018
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	11,739,138	4	11,103,574
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
_د	6	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		5	0
e			0	6	0
Assets	7	Notes and loans receivable, net	721,642	7	297,193
₹	8	Inventories for sale or use	262,043	8	263,159
	9	Prepaid expenses and deferred charges	537,922	9	1,380,365
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 31,142,771			
	ь	Less accumulated depreciation 10b 29,167,746	2,115,836	10 c	1,975,025
	11	Investments—publicly traded securities	90,999,007	11	70,979,170
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	1,499,791	15	1,297,551
	16	Total assets. Add lines 1 through 15 (must equal line 34)	116,234,300	16	95,845,800
	17	Accounts payable and accrued expenses	7,906,037	17	3,894,943
	18	Grants payable	0	18	0
	19	Deferred revenue	6,211,226	19	2,386,311
	20	Tax-exempt bond liabilities	0	20	0
φ.	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	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	75 204 020		00 040 272
	26	D	75,364,636 89,481,899		86,916,373
	26	Total liabilities. Add lines 17 through 25	69,461,699	26	93,197,627
Φ S		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
Ë	27	Unrestricted net assets	26,752,401	27	2,648,173
<u>ප</u>	28	Temporarily restricted net assets	0	28	0
<u> </u>	29	Permanently restricted net assets	0	29	0
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
₽₽	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
₹	33	Total net assets or fund balances	26,752,401	33	2,648,173
Ř	34	Total liabilities and net assets/fund balances	116,234,300		95,845,800
	<u> </u>	rotar natificies and net assets/juild balances	110,234,300	34	95,545,600

Par	Reconcilliation 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		145,2	260,764
2	Total expenses (must equal Part IX, column (A), line 25)	2		159.7	739,199
3	Revenue less expenses Subtract line 2 from line 1				
	Not contain the form of the summer of the su	3		-14,4	178,435
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		26,	752,401
5	Net unrealized gains (losses) on investments				21 240
6	Donated services and use of facilities	5			-21,249
	bonated services and ase or identities	6			
7	Investment expenses	7			
8	Prior period adjustments				
	· · · · · · · · · · · · · · · · · · ·	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-9,6	504,544
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			548,173
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
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?	3	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

(24) FRANK MORONEY

INTERNATIONAL VICE PRESIDENT

Software ID: Software Version:

EIN: 53-0237789

Name: AMERICAN FEDERATION OF STATE COUNTY

AND MUNICIPAL EMPLOYEES

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (E) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe Former Individual trustae or director organizations related Institutional Trustee below organizations emplo)ee dotted line) t compensated ee (1) LEE SAUNDERS 35.0 PRESIDENT 0_0 Χ 330,235 Χ -59,640 (1) LAURA REYES 35 0 Χ Χ 269,796 0 195,922 SECRETARY-TREASURER 0 0 (2) KEN ALLEN 3 0 Х Х 17.600 0 0 INTERNATIONAL VICE PRESIDENT 0 0 (3) HENRY BAYER 3 0 Х 0 Х 119,800 0 INTL VICE PRESIDENT (RETIRED) 0 0 (4) KENNETH DEITZ 3 0 Х Х 17,600 0 0 INTERNATIONAL VICE PRESIDENT (5) GREG DEVEREUX 3 0 Х Χ 18,200 0 0 INTERNATIONAL VICE PRESIDENT 0 0 (6) DANNY DONOHUE 3.0 Χ 0 17,600 0 INTERNATIONAL VICE PRESIDENT 0 0 (7) DAVID R FILLMAN 3 0 Χ Х 17,600 0 INTERNATIONAL VICE PRESIDENT 0.0 (8) MICHAEL FOX 3 0 Χ Х 0 0 17,600 INTERNATIONAL VICE PRESIDENT 0 0 (9) KATHLEEN P GARRISON 3 0 Х 0 0 INTERNATIONAL VICE PRESIDENT Χ 17,600 0 0 (10) RAGLAN GEORGE JR 3 0 Χ 0 Х 14,800 0 0 0 INTL VICE PRESIDENT (RETIRED) 3 0 (11) MATTIE R HARRELL Χ Χ 18,000 0 0 INTERNATIONAL VICE PRESIDENT 0 0 (12) JOHANNA P HESTER 3.0 Χ 17,600 0 0 Χ 0 0 INTERNATIONAL VICE PRESIDENT (13) DANNY J HOMAN 3 0 Х Х 17,800 0 0 INTERNATIONAL VICE PRESIDENT 0.0 (14) MELVIN HUGHES SR 3 0 Х 0 Х 9,032 0 INTERNATIONAL VICE PRESIDENT 0 0 (15) SALVATORE LUCIANO 3 0 Х Х 0 0 17,600 INTERNATIONAL VICE PRESIDENT 0 0 (16) JOHN A LYALL 3 0 Х 0 Х 17,600 0 INTERNATIONAL VICE PRESIDENT (17) KATHRYN LYBARGER 3 0 Χ Х 17,600 0 0 INTERNATIONAL VICE PRESIDENT 0 0 (18) ROBERTA LYNCH 3.0 Х Х 0 0 17,600 0 0 INTERNATIONAL VICE PRESIDENT (19) CHRISTOPHER A MABE 3 0 Χ Χ 17,600 0 0 INTERNATIONAL VICE PRESIDENT 0.0 (20) GLENARD S MIDDLETON SR 3 0 Х Х 17,600 0 0 INTERNATIONAL VICE PRESIDENT 0 0 (21) RALPH MILLER 3 0 Χ 0 0 Χ 17,600 INTERNATIONAL VICE PRESIDENT 0 0 (22) GARY MITCHELL 3 0 Х Χ 17,600 0 0 0 0 INTERNATIONAL VICE PRESIDENT (23) DOUGLAS MOORE 3 0 INTERNATIONAL VICE PRESIDENT Χ Χ 17,600 0 0 0 0

3 0

0 0

Χ

17,800

0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (C) (A) (B) (D) (E) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Former 970 Highest compensated employee Individual trustee or director organizations related Institutional below organizations emplo) ee dotted line) Trustee (26) HENRY NICHOLAS 3.0 Χ Χ 17,600 0 0 INTERNATIONAL VICE PRESIDENT 0.0 (1) RANDOLPH P PERREIRA 3 0 Х Χ 17,600 0 INTERNATIONAL VICE PRESIDENT 0 0 (2) GREGORY POWELL 3 0 Χ Х 0 0 O INTL VICE PRESIDENT (RETIRED) 0 0 (3) STEVEN QUICK SR 3 0 Х 0 0 Х 18,232 INTERNATIONAL VICE PRESIDENT 0 0 (4) LILLIAN ROBERTS 3 0 Χ Χ 17,600 0 0 INTERNATIONAL VICE PRESIDENT 0 0 (5) EDWARD RODRIQUEZ 3 0 Χ Χ 0 0 INTERNATIONAL VICE PRESIDENT 17,600 0 0 (6) LAWRENCE A ROEHRIG 3 0 Χ Х 0 0 17,600 INTERNATIONAL VICE PRESIDENT 0 0 (7) JOSEPH RUGOLA 3 0 Χ Х 17,600 0 O INTERNATIONAL VICE PRESIDENT 0 0 (8) ELIOT SEIDE 3 0 Х 17,600 0 0 Х INTERNATIONAL VICE PRESIDENT 0 0 (9) MARY SULLIVAN 3 0 Χ Χ 17,600 0 0 INTERNATIONAL VICE PRESIDENT 0 0 (10) BRAULIO TORRES 3.0 Χ Χ 0 0 17,600 INTERNATIONAL VICE PRESIDENT 0 0 (11) JEANETTE WYNN 3 0 Х 0 Х 17,600 INTERNATIONAL VICE PRESIDENT 0 0 (12) PAUL BOOTH 35 0 Χ 252,904 0 112,942 EXECUTIVE ASST TO PRESIDENT 0 0 (13) STEPHAN FANTAUZZO 35 0 Х 249,987 0 195,943 CHIEF OF STAFF TO PRESIDENT 0 0 (14) CHARLES JURGONIS 35 0 Χ 223,216 0 83,377 DIRECTOR, FINANCIAL SERVICES 0 0 (15) WILLIAM LURYE 35.0 Х 215,476 0 141,163 GENERAL COUNSEL 0 0 (16) STEVEN GRETSUK 35 0 Х 207,297 0 104,524 DIRECTOR, INFORMATION SYSTEMS (17) MICHAEL SUKAL 35 0 195,202 Х 0 108,842 DIRECTOR, ORG & FIELD SERVICES 0 0 (18) JESSICA WEINSTEIN 35 0 Х 191,299 0 81,844 ASSISTANT TO THE PRESIDENT 0 0 (19) LINDA CANAN STEPHENS 35 0 Χ 365,274 0 73,441 EXEC ASST-SECY-TREAS (RETIRED) 0 0 (20) DOREEN SCHICKTON 35 0 0 Х 281,728 136,678 POLITICAL RESEARCH (RETIRED) 0 0 (21) CHARLES LOVELESS 35 0 Х 281,414 0 74,683 DIRECTOR, LEGISLATION(RETIRED) (22) DELBERT PRICE 35 0 Х 272,766 0 56,849 INTL UNION REP (RETIRED) 0 0 (23) JOSEPH LAWRENCE 35 0 Χ 266,049 0 55,403 STRATEGIC COMM SPEC (RETIRED) 0 0

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OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

AME	Name of the organization AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES Employer 53-0237				
ar	t I-A Complete if the organization is exempt under section 501(c) or is a sect	ion 52	7 org	janizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV				
2	Political expenditures	-	\$	1	,871,881
3	Volunteer hours		_		
ar	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	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	▶	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No
4a	Was a correction made?			☐ Yes	┌ No
b	If "Yes," describe in Part IV				
ar	t I-C Complete if the organization is exempt under section 501(c), except sec	ction 50)1(c	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function activit	ies 🕨	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527				
	exempt function activities	!-	\$		

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

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter - 0-	(e) A mount 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		8,980,249
(2) AFSCME SPECIAL ACCOUNT	1625 L STREET NW WASHINGTON, DC 20036	91-2064198		39,413,689

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

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2014					Page 2
P	cart II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and fi	led Form 5768	
	Check ► If the filing organization belongs to a		list in Part IV ea	ich affiliated gr	oup member's nam	e, address, EIN,
В	expenses, and share of excess lobbed Check F if the filing organization checked bo		ol" provisions apr	olv		
	Limits on Lobbying E (The term "expenditures" means an	Expenditures		,	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	obying)			
b	Total lobbying expenditures to influence a legisl	atıve body (dırect lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1					
f	Lobbying nontaxable amount Enter the amount to					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of th	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000					
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er -0-				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 rep	oorting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t		ection do not uctions for li	have to co nes 2a thro	ugh 2f.)	he five
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has No filed Form 5768 (election under section 501(h)).	от			age J
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activ	· · · · · · · · · · · · · · · · · · ·	Yes	No	Amoun	it
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?				
j	Total Add lines 1c through 1i				
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				
С	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 505(c)(6).)1(c)	(5), c	r sectio	n
	· // /			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		Г	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 carry over lobbying and political expenditures from the prior year?			3	Νo
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 50				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."	ю" О	R (b)	Part III-	-А,
1	Dues, assessments and similar amounts from members	1			
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).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
_	political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
	Supplemental Information				
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group see instructions), and Part II-B, line 1 Also, complete this part for any additional information	lıst),	Part II	-A, lines 1	and
	Return Reference Explanation				
IND	T I-A, LINE 1 - DIRECT AND CONSISTED OF MEMBER TO MEMBER COMMUNICATIONS IVER IN THE PROPERTY OF THE PROPERTY O				

Part IV Supplemental Inf	ormation (continued)
Return Reference	Explanation
·	_

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493317097945

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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.

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES 53-0237789 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the tax year 🟲 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	Titl Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Ti</u>	<u>reasu</u>	<u>ires, or Ot</u>	<u>hei</u>	<u> Similar As</u>	sets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck	any of	the foll	owing that ar	e a	significant use	of its	
а	Public exhibition		d	Γ	Loan	orexc	hange progra	ms			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furth	er the o	organızatıon's	s ex	empt purpose II	n	
5	During the year, did the organization solicit									_	_
Do.	assets to be sold to raise funds rather than t		•						<u>.</u>	Yes	No_
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answered	Y	es to Form 9	90,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?						or other asse	ts n	ot	_ Yes	
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving	able						
									Am	ount	
С	Beginning balance							Lc			
d	Additions during the year						1	Ld			
e	Distributions during the year						1	le			
f	Ending balance						1	Lf			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21,	for e	scrow	rcust	odial accoun	t lıa	bility? [Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II Check here if the	expl	anatı	on has	been c	provided in Pa	art >	KIII		Γ
Pa	rt V Endowment Funds. Complete										
	·	(a)Current year) Prior						(e)Four y	ears back
1a	Beginning of year balance										
b	Contributions										
C	Net investment earnings, gains, and 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 cur	rent year end baland	e (lın	ie 1g	, colum	n (a))	held as				
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment ▶										
С	Temporarily restricted endowment ►										
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse	ssion of the organiza	ation	that	are hel	d and a	dministered	for	the		
	organization by	_								Yes	No
	(i) unrelated organizations			•				•	3a(
	(ii) related organizations							•	3a(i		<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second organization.							•	3b	<u> </u>	<u> </u>
	t VI Land, Buildings, and Equipme					n ancı	warad 'Vas'	to	Form 990 Da	rt TV/	ıne
I GI	11a. See Form 990, Part X, line		.110 0	rgar	1124110	ii ansv	wered res	to	101111 330, 1 a	1010,1	ii iC
	Description of property) Cost or is (inves		(b)Cost or oth basis (other		(c) Accumulated depreciation	(d) B	ook value
1a	Land									1	
b	Buildings										
С	Leasehold improvements										
d	Equipment						23,848,2	242	22,638,34	3	1,209,899
	0 + h = #						7,294,	529	6,529,40	3	765,126
	I. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part)	X. colu	ımn (B), line	10(c).))		🕨		1,975,025

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	ipiete ii tile organization i	answered res to form 990, Part IV, line IID.
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		, , , , , , , , , , , , , , , , , , , ,
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. Co See Form 990, Part X, line 13.	mplete if the organization	n answered 'Yes' to Form 990, Part IV, line 11
(a) Description of investment	(b) Book value	(c) Method of valuation
	` ,	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•	
		, Part IV, line 11d See Form 990, Part X, line 15
(a) Descri	ption	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15		
Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25.	nization answered 'Yes' to	o Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
Federal Income taxes ACCRUED POSTRETIREMENT BENEFIT	70,133,000	
ACCRUED POSTRETTREMENT BENEFIT ACCRUED SEVERANCE PAY	5,919,540	
INSURANCE RESERVE	4,943,778	
ACCRUED VACATION & SICK PAY	3,162,045	
DEFERRED COMPENSATION	2,150,000	
ESCROW FUNDS	608,010	
200.0 11 01100	000,010	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	86,916,373	

Par		Revenue per Audited Financial Stawered 'Yes' to Form 990, Part IV, line :		nts With Revenue p	er R	eturn Complete If
1		er support per audited financial statements			1	191,873,540
2	Amounts included on line 1 b	ut not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments	2a	-21,249		
b	Donated services and use of	facilities	2b			
C	Recoveries of prior year grant	ts	2c			
d	Other (Describe in Part XIII)	2d	46,634,025		
е	Add lines 2a through 2d		٠		2e	46,612,776
3	Subtract line 2e from line 1 .				3	145,260,764
4	Amounts included on Form 99	90, Part VIII, line 12, but not on line 1				
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b		٠		4c	
5	Total revenue Add lines 3 an	d 4c. (This must equal Form 990, Part I, line	12)		5	145,260,764
Par		xpenses per Audited Financial St			per	Return. Complete
		nswered 'Yes' to Form 990, Part IV, line			_	
1		er audited financial statements	•		1	217,880,587
2		ut not on Form 990, Part IX, line 25	1 _	1		
a		facilities	2a			
b	, ,		2b			
С	Other losses		2c			
d	•)	2d	58,141,388		
е	_				2e	58,141,388
3					3	159,739,199
4		90, Part IX, line 25, but not on line 1:	1	1		
а	•	luded on Form 990, Part VIII, line 7b	-			
b	•)	4b			
С					4 c	
5		and 4c. (This must equal Form 990, Part I, lin	e 18)		5	159,739,199
	Supplemental In					
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a I, lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
	X, LINE 2 - FIN 48 NOTE	Accounting principles generally accepted evaluate income tax positions taken and a uncertain position that more likely than no Revenue Service Management has evalua December 31, 2014, there are no uncerta require accrual of a liability in the consolic routine audits by taxing jurisdictions, how progress	ccrue t would ted the in posi lated f	an income tax liability if d not be sustained upon o e income tax positions ta tions taken or expected i nancial statements The	the Fe exami ken a to be t Feder	deration has taken an nation by the Internal nd concluded that as of taken that would ration is subject to
INCL	XI, LINE 2D - REVENUES UDED ON FINANCIALS, NOT ORM 990	\$46,634,025 RELATED ORGANIZATION	IS RE\	/ENUES		
INCL	XII, LINE 2D - EXPENSES UDED ON FINANICALS, NOT ORM 990	\$ 9,066,000 POSTRETIREMENT-RELAT ORGANIZATIONS \$ 538,544 LOSS REC ACCOUNTING \$ 58,141,38	OGNI	ZED UNDER THE EQUIT		

Jenedale 2 (1 31111 33 3) 23 13		i age S
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

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

2014

OMB No 1545-0047

DLN: 93493317097945

(Form 990)

				n 990, Part IV, line 21 or		4	LU I T		
Department of the Treasury Internal Revenue Service	easury Attach to Form 990.								
Name of the organization AMERICAN FEDERATION OF STA AND MUNICIPAL EMPLOYEES						Employer identification	on number		
 Part I General Informat Does the organization maintain the selection criteria used to a Describe in Part IV the organization 	n records to substant award the grants or as	rate the amount of the quarters sistance?					▼Yes 「N		
				Governments. Com ort II can be duplicate			es" to		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount 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 gran or assistance		
See Addıtıonal Data Table									

Enter total number of other organizations listed in the line 1 table

56

43

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated 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	36	72,000			
(2) JERRY CLARK MEMORIAL SCHOLARSHIP	4	20,000			
(3) JOE PARISI SCHOLARSHIP	1	3,077			

Part IV Supplemental In	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.						
Return Reference	Explanation						
GRANTS	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						

Additional Data

Software ID:

Software Version:

EIN: 53-0237789

Name: AMERICAN FEDERATION OF STATE COUNTY

AND MUNICIPAL EMPLOYEES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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)	369,375				GENERAL SUPPORT

Form 990,Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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			
Leadership Conference On Civil Rights INC1629 K ST NW 10TH FLOOR WASHINGTON,DC 20006	52-0789800	501(C)(4)	60,000				GENERAL SUPPORT			

Form 990,Schedule I, Pai	rt II, Grants an	<u>.d Other Assistance</u>	<u>a to Domestic Org</u>	anizations and Do	mestic Governmer	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Congressional Hispanic Caucus Institute Inc300 M STREET SE WASHINGTON,DC 20003	52-1114225	501(C)(3)	6,000				SPO NSO RSHIP

Form 990,Schedule 1, Pai	t II, Grants and	<u>a Otner Assistance</u>	to Domestic Orga	anizations and Do	<u>mestic Governmei</u>	nts.	
(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
Congressional Black Caucus Foundation Inc1720 MASSACHUSETTS AVE WASHINGTON,DC 20036	52-1160561	501(C)(3)	35,000				SPO NSO RSHIP

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 Change 455 MASS AVE NW WASHINGTON,DC 20001	03-0556312	501(C)(4)	250,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Coalition On Human Needs 1015 18th St NW STE 1101 WASHINGTON, DC 20036	26-5680984	501(c)(3)	11,500				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 Funding1640 Rhode Island Ave WASHINGTON, DC 20036	52-0891509	501(C)(4)	10,300				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Economic Policy Institute 1333 H STREET NW STE 300 EAST TOWER WASHINGTON, DC 20005	52-1368964	501(C)(3)	50,000				THINK TANK		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 Action Network Inc 106 WEST 145TH STREET NEW YORK, NY 10039	11-3269182	501(C)(4)	126,500				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 WASHINGTON,DC 20009	23-7124915	501(C)(3)	10,000				Sponsorship		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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)	12,500				Sponsorship				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 Yorkers For Fiscal Fairness INC212 GREAT OAKS BLVD ALBANY,NY 12203	14-1791695	501(C)(4)	165,000				PUBLIC POLICY		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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				Sponsorship			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
United Negro College Fund INC1805 7th St NW Washington,DC 20001	13-1624241	501(C)(3)	55,000				Education		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 AMERICA815 16TH STREET NW WASHINGTON,DC 20006	20-0263611	501(C)(5)	1,200,000				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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	20-3765839	501(C)(4)	10,000				Public Policy			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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 PROJECT75 MAIDEN LANE STE 601 NEW YORK, NY 10038	13-2758558	501(C)(3)	25,000				Public Policy			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
LABOR PROJECT FOR WORKING FAMILIES2521 CHANNING WAY STE 5555 BERKELEY,CA 94720	94-3284312	501(c)(3)	7,500				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
JOBS WITH JUSTICE EDUCATION FUND1616 P St NW WASHINGTON,DC 20036	52-1865575	501(C)(3)	100,000				Public Interest		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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		
JEWISH LABOR COMMITTEE140 W 31st St 3rd Fl New York, NY 10001	23-7213592	501(c)(3)	10,000				Sponsorship		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
FISCAL POLICY INSTITUTE1 LEAR JET LANE LATHAM,NY 12110	14-1737256	501(c)(3)	35,000				Public Policy			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		75,000				Public Interest		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
CONGRESSIONAL BLACK CAUCUS INSTITUTE413 NEW JERSEY AVE SE WASHINGTON, DC 20003	52-2270607	501(C)(4)	10,000				Sponsorship			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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)	100,000				Public Interest		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 INTEGRITY po box 370225 DENVER,CO 80237	26-4144378	501(C)(4)	15,000				Public Interest		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
BALLOT INITIATIVE STRATEGY CENTER1815 Adams Mill RD WASHINGTON, DC 20009	04-3411708	501(C)(4)	180,000				Public Policy		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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)	346,500				general support		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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)	10,000				Sponsorship			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
America Votes1155 connecticut ave NW Washington,DC 20036	26-4568349	501(C)(4)	619,250				Public Interest		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 For Democratic Action Inc1629 K Street NW Washington,DC 20006	53-0180733	501(C)(4)	16,500				GENERAL SUPPORT		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
Campaign For America's Future1825 K Street NW Washington, DC 20006	52-1861766	501(C)(4)	50,000				Sponsorship			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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			
Children's Defense Fund25 E street nw washingston, DC 20001	52-0895622	501(c)(3)	10,000				Sponsorship			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Good Jobs First1616 P ST NW Washington,DC 20036	82-0542649	501(C)(3)	45,000				Public Policy		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 Citizens' Coalition For Nursing1001 Conn Ave NW Washington, DC 20036	52-1122531	501(C)(3)	7,500				PUBLIC POLICY		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Netroots Nation1559B SLOAT BLVD San Francisco, CA 94132	20-4465717	501(C)(4)	15,000				Sponsorship		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
Texas Organizing Project 2404 CAROLINE STREET Houston,TX 77004	27-1482075		50,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 American Prospect1710 Rhode Island Ave Washington,DC 20036	52-1617061	501(C)(3)	25,000				GENERAL SUPPORT			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 Nation Institute162 W 54th St Sutie 4A/4C New York, NY 10019	13-6216903	501(C)(3)	10,000				SPO NSO RSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Democracy Alliance1575 Eye St nw washington,DC 20005	20-2130918		60,000				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 Ohio35 e gay street ste 260 columbus,OH 43215	27-4562062	501(c)(4)	50,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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 GAIN888 16TH ST washington, DC 20036	87-0694232	501(c)(6)	20,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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-CIO815 16th street nw washington,DC 20006	52-2217817	501(c)(4)	10,000				Sponsorship		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 on States1575 I St nw washington,DC 20005	26-3815183	501(C)(4)	25,000				General Support		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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			
Partnership for Working Families1825 k street washington,DC 20006	46-3288374	501(c)(3)	10,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
Patriot Majority USAPO Box 35522 Washington, DC 20033	45-0710294	501(C)(4)	650,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
Sixteen Thirty Fund1201 CONN AVE NW Washington, DC 20036	26-4486735	501(C)(4)	460,000				General Support			

orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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	
South Florida AFL-CIO4349 NW 36th St Suite 107 Miami Springs,FL 33166	59-0828587	501(c)(5)	30,590				General Support	

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Media Matters Action Network455 Massachusetts Ave Suite 600 Washington,DC 20001	77-0646754	501(C)(4)	30,000				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(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	
NETWORK25 E Street nw 200 Washington, DC 20001	52-0984255	501(C)(4)	75,000				General Support	

Form 990,Schedule 1, Pa	form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 Responsibility & Ethics1400 Eye Street Suite 450 Washington, DC 20005	03-0445391	501(C)(3)	25,000				Public Interest		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 Wisconsin Inc203 S Paterson Street Suite 200 Madison, WI 53703	30-1785179	501(C)(4)	15,000				General Support		

Form 990,Schedule 1, Pa	form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 Economic and Policy Research1611 Connecticut Ave Washington, DC 20009	52-2204029	501(C)(3)	35,000				General Support			

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(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 ActionIllinois27 E Monroe Suite 100 Chicago,IL 60603	36-4163480	501(C)(4)	20,000				General Support	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 Women's Law Center Action Fund11 Dupont Circle Suite 800 Washington, DC 20036	46-0639645	501(C)(4)	15,000				General Support		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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			
Medicare Rights Center520 8th Avenue 3rd Floor New York, NY 10018	13-3505372	501(C)(3)	10,000				Public Policy			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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			
Maine AFL-CIO 21 Gabriel Drive Augusta, ME 04330	01-0113840	501(c)(5)	30,000				General Support			

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
People for The American Way Foundation1101 15th St NW 6th Floor Washington, DC 20005		501(C)(3)	10,000				Sponsorship		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
A PHILIP RANDOLPH EDUCATION FUND815 16TH ST NW 4TH FL WASHINGTON,DC 20006	13-6180232	501(C)(3)	10,000				SPO NSO RSHIP		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 EFFECTIVE GOVERNMENT2040 S ST NW 2ND FL WASHINGTON, DC 20009	52-1302617	501(C)(3)	25,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COLOR OF CHANGEORG 1714 FRANKLIN ST OAKLAND,CA 94612	20-4496889	501(C)(4)	27,000				Program Support			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
MIDWEST ACADEMY27 E MONROE 11TH FL CHICAGO,IL 60603	36-2776406	501(C)(3)	10,000				SPONORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
PLANNED PARENTHOOD ACTION FUND434 W 33RD ST NEW YORK, NY 10001	13-3539048	501(C)(4)	400,000				PUBLIC POLICY		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
PROGRESSIVE CONGRESS 600 PENN AVE SE SUITE 340 WASHINGTON, DC 20003	20-3712244	501(C)(3)	100,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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 CENTER FOR MEDIA AND DEMOCRACY520 UNIVERSITY AVE MADISON,WI 53703	39-1777402	501(c)(3)	37,500				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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 Health Reform 1444 Eye Street NW Washington, DC 20005	52-1746328	501(C)(3)	7,500				Sponsorship			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
America Votes State Engagement Fund1575 Eye Street NW Washington, DC 20005	26-4568349	501(C)(4)	250,000				Public Interest		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 Assoc of Classified School Employees555 New Jersey Ave NW Washington, DC 20001	31-1000006	501(C)(6)	12,000				Education			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
Arkansas Interfaith Alliance 1000 W 3rd Street Little Rock, AR 72201	41-2190505	501(C)(4)	20,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Baylor University 1 Bear Place 97048 Waco, TX 76798	74-1159753	501(C)(3)	10,372				Education		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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 Progress Action Fund1333 H Street NW 10th Floor Washington, DC 20005	30-0192708	501(C)(3)	100,000				General Support			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 Pension Responsibility1 E Lexington Avenue 1210 Phoenix,AZ 85012	47-1148618		125,000				Public Interest		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 to Reduce Income Inequality534 S Second Suite 200 Springfield,IL 62701	36-2388785		400,000				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Diversified Media Enterprises 520 University Ave Suite 320 Madison, WI 53703	34-2032314		10,000				Sponsorship		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
Drake University2507 University Avenue Des Moines,IA 50311	42-0680460	501(C)(3)	25,000				Education			

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(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 Share294 Washington Street Suite 500 Boston, MA 02108	26-1525298	501(C)(4)	250,000				General Support	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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's Next Leaders4644 W Gandy Blvd Suite 4-166 Tampa,FL 33611	46-3831539		15,000				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Georgetown University37th and O Streets NW Washington,DC 20057	53-0196603	501(C)(3)	30,000				Education		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Harvard University79 John F Kennedy St Cambridge, MA 02138	04-2103580	501(C)(3)	10,000				Education		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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		
Labor Community at Work Inc633 S Hawley Road Suite 110 Milwaukee, WI 53214	87-0704197	501(C)(3)	10,000				General Support		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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		
Mı Familia Vota1710 E Indian School Rd Suite 100 Phoenix,AZ 85016	80-0668995	501(C)(4)	66,000				Public Interest		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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		
Montanans for Free and Fair Elections500 North Higgins Avenue Suite 103 Missoula, MT 59802	46-2559616		25,000				Public Interest		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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 Council of La Raza 1111 19th Street NW 1000 Washington, DC 20036	45-5341145	501(C)(4)	255,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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		
Nebraskans for Better Wages 1700 Farnam Street Suite 2860 Omaha,NE 68102	46-5607005		10,000				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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			
North Carolina State Conference of the NAACPPO Box 335 Durham, NC 27702	56-6061662	501(C)(3)	50,000				Sponsorship			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Partnership for Working Families Action Fd1825 K Street Suite 210 Washington, CA 20006	46-3288374	501(C)(4)	212,500				General Support		

Form 990,Schedule 1, Pa	Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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			
Peggy Browning Fund1528 Walnut Street Suite 1904 Philidelphia,PA 19102	23-2887086	501(C)(3)	10,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
PICO National Network110 Maryland Ave NE Suite 201 Washington,DC 20002	94-2206497	501(C)(3)	10,000				Public Interest		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Repeal 373333 Denali Street Suite 125 Anchorage,AK 99503	92-0010498		100,000				General Support		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 Center for Popular Democracy802 Kent Avenue Brooklyn,NY 11205	45-3813436	501(C)(3)	7,500				Sponsorship			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 Women's Law Center11 Dupont Circle Suite 800 Washington, DC 20036	52-1213010	501(C)(3)	10,000				Sponsorship			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Third Sector Development 165 Courtland Street Suite A-231 Atlanta, GA 30303	58-2421574	501(C)(3)	50,000				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Thurgood Marshall College Fund901 F Street SE Washington, DC 20004	41-1750692	501(C)(3)	95,872				Education		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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 Action1825 K Street NW Washington,DC 20006	52-2143105	501(C)(4)	135,000				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
Voter Protection Fund USAction1825 K Street NW Suite 210 Washington, DC 20006	52-2214305	501(C)(4)	25,000				General Support		

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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				
VoteVets Action FundPO Box 10031 Portland,OR 97296	51-0596352	501(C)(4)	350,000				General Support				

<u>Form 990,Schedule I, Pa</u>	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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				
We Are Milwaukee1862 W Fond du Lac Ave Milwaukee, WI 53205	45-4924700	501(c)(4)	24,000				General Support				

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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				
Wisconsin Jobs Now1862 W Fond du Lac Ave Milwaukee, WI 53205	46-5632583		25,000				Public Interest				

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Citizen ActionIllinois27 East Monroe Chicago,IL 60603	36-4163480	501(C)(4)	20,000				General Support			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(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				
ProgressNow5922 Excelsior Blvd St Louis Park, MN 55416	20-8720230	501(C)(4)	250,000				Public Policy				

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DLN: 93493317097945

OMB No 1545-0047

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Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES

Employer identification number 53-0237789

Pai	t I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Tax idemnification and gross-up payments			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
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			
	Compensation committee Written employment contract			
	Independent compensation consultant			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
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 pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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)(1)-(111) 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

(A) Name and Title	(B) Breakdown o	 f W-2 and/or 1099-MI!	W-2 and/or 1099-MISC compensation		(D) Nontaxable	(E) Total of	(F) Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
PROVIDED TO PERSONS LISTED	FIRST-CLASS TRAVELTWO 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
	SEVERANCE PAYMENTS LINDA CANAN STEPHENS \$220,744 CHARLES LOVELESS \$154,311 DOREEN SCHICKTON \$143,661 DELBERT PRICE \$128,462 JOSEPH LAWRENCE \$125,124
•	THE AMOUNT IN THE DEFERRED COMPENSATION COLUMN REPRESENTS THE ANNUAL INCREASE IN ACTUARIAL VALUE OF A QUALIFIED DEFINED BENEFIT PLAN, AS CALCULATED BY THE PLAN ACTUARY

Schedule J (Form 990) 2014

Software ID:

Software Version:

EIN: 53-0237789

Name: AMERICAN FEDERATION OF STATE COUNTY

AND MUNICIPAL EMPLOYEES

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of (i) Base Compensation	of W-2 and/or 1099-MI (ii) Bonus & Incentive compensation	ISC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
1 LEE SAUNDERS, PRESIDENT	(I) (II)			28,433	-87,643 0	28,003	270,595 0	0
1 LAURA REYES, SECRETARY-TREASURER	(I) (II)	256,532		13,264	167,919 0	28,003	465,718 0	0
2 PAUL BOOTH, EXECUTIVE ASST TO PRESIDENT	(I) (II)			18,865	84,939 0	28,003	365,846 0	0
3 STEPHAN FANTAUZZO, CHIEF OF STAFF TO PRESIDENT	(I) (II)			9,568	167,940 0	28,003	445,930 0	0
4 CHARLES JURGONIS, DIRECTOR, FINANCIAL SERVICES	(I) (II)			15,100	55,374 0	28,003	306,593 0	0
5 WILLIAM LURYE, GENERAL COUNSEL	(ı) (ıı)			7,600	113,160	28,003	356,639 0	0
6 STEVEN GRETSUK, DIRECTOR, INFORMATION SYSTEMS	(I) (II)	201,185		6,112	76,521 0	28,003 0	311,821 0	0
7 MICHAEL SUKAL, DIRECTOR, ORG & FIELD SERVICES	(I) (II)			4,930	80,839 0	28,003 0	304,044 0	0
8 JESSICA WEINSTEIN, ASSISTANT TO THE PRESIDENT	(I) (II)			4,785	53,841 0	28,003 0	273,143 0	0
9 LINDA CANAN STEPHENS, EXEC ASST-SECY-TREAS (RETIRED)	(I) (II)			224,981	57,106 0	16,335 0	438,715 0	0
10 DOREEN SCHICKTON, POLITICAL RESEARCH (RETIRED)	(I) (II)			145,226	108,675 0	28,003	418,406 0	0
11 CHARLES LOVELESS, DIRECTOR, LEGISLATION (RETIRED)	(I) (II)			160,001	69,226 0	5,457 0	356,097 0	0
12 DELBERT PRICE, INTL UNION REP (RETIRED)	(I) (II)			144,915	28,846 0	28,003 0	329,615 0	0
13 JOSEPH LAWRENCE, STRATEGIC COMM SPEC (RETIRED)	(I)	126,252		139,797	27,400 0	28,003 0	321,452 0	0

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2014

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Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(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.

Name of the organization
AMERICAN FEDERATION OF STATE COUNTY
AND MUNICIPAL EMPLOYEES

Employer identification number

53-0237789

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION A, LINE 1 - EXECUTIVE COMMITTEE	
PART VI, SECTION A, LINE 4 - SIGNIFICANT CHANGES TO CONSTITUTION	THE CONSTITUTION WAS AMENDED IN 2014 AT THE CONVENTION TO NOTED THE FOLLOWING CHANGES 1 INCLUDE ORGANIZING COMMITTEES AMONG GROUPS WHOSE AFFILIATES MAY UNITE TO SEND DELEGATES TO THE INTERNATIONAL CONVENTION 2 TO INCREASE THE MAXIMUM VALUE OF A PAPER BALLOT 3 ON C ONVENING A SPECIAL LEGISLATIVE DISTRICT CONVENTION TO ELECT AN INTERNATIONAL VICE-PRESIDEN T 4 TO ADDRESS THE SUBORDINATE BODY APPEAL PERIOD FOR THE ESTABLISHMENT OF AN ORGANIZING COMMITTEE 5 TO PROVIDE FOR ELECTRONIC MEETINGS OF SUBORDINATE BODIES
PART VI, SECTION A, LINE 6 - MEMBERS	AFSCME is comprised of members with the right to elect their delegates, who elect the governing body
PART VI, SECTION A, LINE 7A - ELECTING OF BOARD MEMBERS	ALL SOVEREIGN POWERS OF THE FEDERATION ARE VESTED IN THE DELEGATION WHO COMPRISE THE CONVE NTION, WHEN IN SESSION THE FEDERATION HOLDS A BLANNUAL CONVENTION THAT IS ATTENDED BY DE LEGATES THE DELEGATES ELECT THE OFFICERS OF THE FEDERATION EVERY FOUR YEARS THESE OFFICE RS COMPRISE THE INTERNATIONAL EXECUTIVE BOARD
PART VI, SECTION B, LINE 11B - REVIEW PROCESS OF FORM 990	THE FORM 990 IS REVIEWED IN DETAIL BY MANAGEMENT AND STAFF PRIOR TO SIGNATURE AND SUBMISSION TO THE INTERNAL REVENUE SERVICE
PART VI, SECTION C, LINE 19 - DISCLOSURE OF DOCUMENTS, POLICIES & F/S	THE FEDERATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY NOR CONS OLIDATED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC
PART VII, SECTION A, COLUMN (F) - ESTIMATED AMOUNT OF OTHER COMPENSATION	\$1,004,143 OF COLUMN F AMOUNT REPRESENTS THE INCREASE IN ACTUARIAL VALUE IN DEFINED BENEFI TS CALCULATED BY THE PLAN ACTUARY THESE AMOUNTS REPORTED ARE NOT ACTUAL OUTLAYS TO THE OF FICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED EMPLOYEES
PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS	\$(9,066,000) POSTRETIREMENT-RELATED CHANGES \$ (538,544) LOSS RECOGNIZED UNDER THE EQUITY M ETHOD OF ACCOUNTING \$(9,604,544) TOTAL OTHER CHANGE IN NET ASSETS ===========

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DLN: 93493317097945

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

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

Department of the Treasury Internal Revenue Service

Name of the organization AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES

Employer identification number 53-0237789

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.								
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity			
(1) AFSCME PUBLIC SERVICE WORKERS LLC 1625 L STREET NW WASHINGTON, DC 20036 20-4455454	INVESTMENT	DE		225,000	AFSCME			

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state	Exempt Code section	Public charity status	Direct controlling	Section !	512(b)
		or foreign country)		(if section 501(c)(3))	entity	(13) cor	ntrolled
						entit	ty?
						Yes	No
See Additional Data Table							

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 3
	because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h		(i)	(j)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	General	or Percentag
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocat	ions?	amount in box	managır	ng ownershi
		(state or	entity	unrelated,		assets			20 of	partner	7
		foreign		excluded from					Schedule K-1		
		country)		tax under					(Form 1065)		
				sections 512-							
				514)							
				,			Yes	No		Yes N	o
											
							•		•		

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust Complete of 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	(i) Section (b)(: contro entit	n 512 13) olled
								Yes	No
(1) AFSCME PUBLIC SERVICE WORKERS CORP 1625 L STREET NW	INVESTMENT	DE	AFSCME	C-CORP			100 000 %	Yes	
WASHINGTON, DC 20036 20-4449100									

No

No

No No No

No No No No No

No No

No

No

No

1m

10

1q Yes

1r

1s

1n Yes

Yes

Yes

Yes

Yes

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

ĽĊ	Transactions with Related Organizations Complete if the organization answered Tes on Form 990, Part 17, line 34, 350, or 36.	•
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	
1 C	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a
b	Gift, grant, or capital contribution to related organization(s)	1b
C	Gift, grant, or capital contribution from related organization(s)	10
d	Loans or loan guarantees to or for related organization(s)	1d
е	Loans or loan guarantees by related organization(s)	16
f	Dividends from related organization(s)	1f
g	Sale of assets to related organization(s)	1 g
h	Purchase of assets from related organization(s)	1h
i	Exchange of assets with related organization(s)	1 i
j	Lease of facilities, equipment, or other assets to related organization(s)	1j
k	Lease of facilities, equipment, or other assets from related organization(s)	1k
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11

- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresh	2 If the answer to any of the	ne above is "Yes," see the instruct	tions for information on who must con	nplete this line, including covered	relationships and transaction threshold
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(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) AFSCME EMPLOYEES PENSION PLAN TRUST FUND	В	4,352,209	ALLOCATION
(2) AFSCME EMPLOYEES PENSION PLAN TRUST FUND	0	228,888	BILLINGS
(3) AFSCME SPECIAL ACCOUNT	Q	1,983,431	BILLINGS
(4) AFSCME EMPLOYEES SALARY SAVINGS PENSION TRUST	R	1,795,223	WITHHOLDINGS

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
/		 .	<u> </u>							

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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

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Software ID: **Software Version:**

EIN: 53-0237789

Name: AMERICAN FEDERATION OF STATE COUNTY

AND MUNICIPAL EMPLOYEES

Form 990, Schedule R, Part II - Identification of R	elated Tax-Exempt Or (b)	ganizations (c)	(d)	(0)	(f)	,	a)
(a) Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	(e) Public charity status (if section 501(c) (3))	Direct controlling entity	Section (b)(: contr	g) on 512 (13) rolled :ity?
	r		1	1	1	Yes	No
(1) AFSCME PEOPLE CONTRIBUTIONS COMMITTEE	POLITICAL	DC	527		AFSCME	Yes	
1625 L STREET NW WASHINGTON, DC 20036 52-1456472							
(1) AFSCME FALLEN HEROES FUND	CHARITABLE	DC	501(c)(3)	7	AFSCME	Yes	
1625 L STREET NW WASHINGTON, DC 20036 52-2344511							
(2) AFSCME TRAINING AND EDUCATION INSTITUTE	TRAINING	DC	501(c)(3)	7	AFSCME	Yes	
1625 L STREET NW WASHINGTON, DC 20036 52-1148573							
(3) AFSCME BUILDING CORPORATION	HOLDING CO	DC	501(c)(2)		AFSCME	Yes	
1625 L STREET NW WASHINGTON, DC 20036 52-1010116							
(4) AFSCME SPECIAL ACCOUNT	POLITICAL	DC	527		AFSCME	Yes	
1625 L STREET NW WASHINGTON, DC 20036 91-2064198							
(5) AFSCME PEOPLE - NON FEDERAL	POLITICAL	DC	527		AFSCME	Yes	
1625 L STREET NW WASHINGTON, DC 20036 91-2066788							
(6) AFSCME PEOPLE - MICHIGAN NONFEDERAL	POLITICAL	DC	527		AFSCME	Yes	
1625 L STREET NW WASHINGTON, DC 20036 91-2063597							
(7) AFSCME EMPLOYEES PENSION PLAN TRUST FUND	PENSION PLAN	DC	401(a)		AFSCME		No
1625 L STREET NW WASHINGTON, DC 20036 53-0237789							
(8) AFSCME EMPLOYEES SALARY SVGS PLAN TR FD	PENSION PLAN	DC	401(k)		AFSCME		No
1625 L STREET NW WASHINGTON, DC 20036 53-0237789							