

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 foundations)

▶ Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990 and its instructions is at www.irs.gov/foi/m990

OMB No 1545-0047
2015
Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015, and ending 12-31-2015

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
 AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES
 % CHARLES JURGONIS
 Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
 1625 L STREET NW

City or town, state or province, country, and ZIP or foreign postal code
 WASHINGTON, DC 200365687

D Employer identification number
 53-0237789

E Telephone number
 (202) 429-1000

G Gross receipts \$ 168,251,797

F Name and address of principal officer
 LEE SAUNDERS
 1625 L STREET NW
 WASHINGTON, DC 20036

H(a) Is this a group return for subordinates?
 No Yes

H(b) Are all subordinates included?
 Yes No
 If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c)(5) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ www.afscme.org

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1932

M State of legal domicile DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities
 THE AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES (AFSCME) IS AN INTERNATIONAL LABOR ORGANIZATION REPRESENTING WORKERS IN THE PUBLIC SERVICE AND HEALTH CARE SECTORS

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	34
4 Number of independent voting members of the governing body (Part VI, line 1b)	0
5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	599
6 Total number of volunteers (estimate if necessary)	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	0	0
	9 Program service revenue (Part VIII, line 2g)	138,451,171	163,741,345
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	180,976	294,821
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,628,617	4,215,631
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	145,260,764	168,251,797
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	11,796,395	7,851,858
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	72,159,090	73,570,699
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ ⁰		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	75,783,714	59,067,415
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	159,739,199	140,489,972	
19 Revenue less expenses Subtract line 18 from line 12	-14,478,435	27,761,825	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	95,845,800	135,000,127
	21 Total liabilities (Part X, line 26)	93,197,627	97,251,210
	22 Net assets or fund balances Subtract line 21 from line 20	2,648,173	37,748,917

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, in my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer
 LEE SAUNDERS PRESIDENT
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name RICHARD L RUVELSON Preparer's signature RICHARD L RUVELSON

Firm's name ▶ BOND BEEBE PC

Firm's address ▶ 4600 EAST-WEST HIGHWAY SUITE 900
 BETHESDA, MD 208143423

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

THE AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES (AFSCME) IS AN INTERNATIONAL LABOR ORGANIZATION REPRESENTING APPROXIMATELY 1,300,000 WORKERS IN THE PUBLIC SERVICE AND HEALTH CARE SECTORS AFSCME SUPPORTS THE ORGANIZING AND COLLECTIVE BARGAINING EFFORTS OF ITS MEMBERS AND PROMOTES INITIATIVES TO BENEFIT WORKING MEN AND WOMEN

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
SUPPORTED AFFILIATED LOCAL UNIONS AND DISTRICT COUNCILS IN ORGANIZING AND NEGOTIATIONS, REPRESENTED UNION MEMBERS AND AFFILIATED ORGANIZATIONS BEFORE THE U S CONGRESS, PROVIDED RESEARCH SERVICES FOR CONTRACT AND BUDGET ANALYSIS, PROVIDED SERVICES TO MEMBERS IN THE AREAS OF EDUCATION, PUBLIC POLICY, LEGISLATION, AND OTHER ISSUES

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	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? <i>If "Yes," complete Schedule C, Part II</i>		
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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	Yes	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

<p>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? <i>If "Yes," complete Schedule I, Parts I and II</i></p>	<p>21</p>	<p>Yes</p>	
<p>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? <i>If "Yes," complete Schedule I, Parts I and III</i></p>	<p>22</p>	<p>Yes</p>	
<p>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></p>	<p>23</p>	<p>Yes</p>	
<p>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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i></p>	<p>24a</p>		<p>No</p>
<p>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</p>	<p>24b</p>		
<p>c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</p>	<p>24c</p>		
<p>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</p>	<p>24d</p>		
<p>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? <i>If "Yes," complete Schedule L, Part I</i></p>	<p>25a</p>		
<p>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? <i>If "Yes," complete Schedule L, Part I</i></p>	<p>25b</p>		
<p>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? <i>If "Yes," complete Schedule L, Part II</i></p>	<p>26</p>		<p>No</p>
<p>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></p>	<p>27</p>		<p>No</p>
<p>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)</p>			
<p>a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i></p>	<p>28a</p>		<p>No</p>
<p>b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i></p>	<p>28b</p>		<p>No</p>
<p>c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i></p>	<p>28c</p>		<p>No</p>
<p>29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i></p>	<p>29</p>		<p>No</p>
<p>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></p>	<p>30</p>		<p>No</p>
<p>31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i></p>	<p>31</p>		<p>No</p>
<p>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i></p>	<p>32</p>		<p>No</p>
<p>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? <i>If "Yes," complete Schedule R, Part I</i></p>	<p>33</p>	<p>Yes</p>	
<p>34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i></p>	<p>34</p>	<p>Yes</p>	
<p>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</p>	<p>35a</p>	<p>Yes</p>	
<p>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)? <i>If "Yes," complete Schedule R, Part V, line 2</i></p>	<p>35b</p>	<p>Yes</p>	
<p>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i></p>	<p>36</p>		
<p>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? <i>If "Yes," complete Schedule R, Part VI</i></p>	<p>37</p>		<p>No</p>
<p>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</p>	<p>38</p>	<p>Yes</p>	

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

Table with columns for question numbers (1a-14b), descriptions, and Yes/No columns. Includes sub-questions for various IRS forms and reporting requirements.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (34); 1b Enter the number of voting members included in line 1a, above, who are independent (0); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (Yes); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? (Yes); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (No); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (No); 13 Did the organization have a written whistleblower policy? (No); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (No); b Other officers or key employees of the organization (No); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (CA); 18 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, [X] 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).

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							3,928,569	0	1,991,776	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 170

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>	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
BREDHOFF KAISER PLLC, 805 FIFTEENTH STREET NW WASHINGTON, DC 20005	LEGAL SERVICES	1,079,537
KELLY PRESS INC, 1701 CABIN BRANCH DRIVE CHEVERLY, MD 20785	PRINTING	678,676
GMMB INC, 3050 K STREET NW SUITE 100 WASHINGTON, DC 20007	CONSULTANT	552,114
BOND BEEBE PC, 4600 EAST-WEST HIGHWAY SUITE 900 BETHESDA, MD 20814	AUDIT & ACCOUNTING	433,114
SOFTCHOICE CORPORATION, 13760 NOEL ROAD SUITE 810 DALLAS, TX 75240	COMPUTER MAINTENANCE	267,097

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 23

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a _____					
	b Membership dues 1b _____					
	c Fundraising events 1c _____					
	d Related organizations 1d _____					
	e Government grants (contributions) 1e _____					
	f All other contributions, gifts, grants, and similar amounts not included above 1f _____					
	g Noncash contributions included in lines 1a-1f \$ _____					
	h Total. Add lines 1a-1f ▶	0				
Program Service Revenue	Business Code					
	2a MEMBERSHIP DUES AND ASSESSMENTS	900099	163,420,676	163,420,676		
	b OFFICE SERVICE & OTHER REIMBURSEMENTS	900099	320,669	320,669		
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶	163,741,345				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶	277,821			277,821	
	4 Income from investment of tax-exempt bond proceeds ▶	0				
	5 Royalties ▶	3,506,644			3,506,644	
	6a Gross rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)	0	0		
	d Net rental income or (loss) ▶	0				
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other		17,000		
		b Less cost or other basis and sales expenses				
		c Gain or (loss)		17,000		
	d Net gain or (loss) ▶	17,000			17,000	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a					
		b Less direct expenses b				
		c Net income or (loss) from fundraising events ▶	0			
	9a Gross income from gaming activities See Part IV, line 19 a					
		b Less direct expenses b				
c Net income or (loss) from gaming activities ▶		0				
10a Gross sales of inventory, less returns and allowances a						
	b Less cost of goods sold b					
	c Net income or (loss) from sales of inventory ▶	0				
Miscellaneous Revenue		Business Code				
11a MISCELLANEOUS	900099	411,278			411,278	
b EXPENSE REIMBURSEMENTS	900099	297,709	297,709			
c _____						
d All other revenue						
e Total. Add lines 11a-11d ▶	708,987					
12 Total revenue. See Instructions ▶	168,251,797	164,039,054			4,212,743	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	7,742,858			
2	Grants and other assistance to domestic individuals See Part IV, line 22	99,000			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	10,000			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,250,777			
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	42,887,968			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,903,216			
9	Other employee benefits	18,932,300			
10	Payroll taxes	3,596,438			
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	1,463,869			
c	Accounting	417,281			
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)	3,593,614			
12	Advertising and promotion	191,313			
13	Office expenses	6,466,094			
14	Information technology	1,182,366			
15	Royalties	0			
16	Occupancy	3,742,278			
17	Travel	11,458,523			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,766,445			
20	Interest	0			
21	Payments to affiliates	26,889,945			
22	Depreciation, depletion, and amortization	700,365			
23	Insurance	501,022			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	REIMBURSED SALARIES/LOST TIME	282,132			
b	PERSONAL PROPERTY TAXES	165,806			
c	DUES REFUNDED	147,577			
d	MEMBERSHIP FEES & DUES	41,463			
e	All other expenses	57,322			
25	Total functional expenses. Add lines 1 through 24e	140,489,972			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	141,745	1	160,783
	2 Savings and temporary cash investments	8,408,018	2	1,594,774
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	11,103,574	4	14,041,370
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	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	0	6	0
	7 Notes and loans receivable, net	297,193	7	0
	8 Inventories for sale or use	263,159	8	217,787
	9 Prepaid expenses and deferred charges	1,380,365	9	808,023
	10a Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a 31,822,571		
	b Less: accumulated depreciation	10b 29,810,113	1,975,025	10c 2,012,458
	11 Investments—publicly traded securities	70,979,170	11	114,768,200
	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	1,297,551	15	1,396,732
16 Total assets. Add lines 1 through 15 (must equal line 34)	95,845,800	16	135,000,127	
Liabilities	17 Accounts payable and accrued expenses	3,894,943	17	7,001,164
	18 Grants payable	0	18	0
	19 Deferred revenue	2,386,311	19	5,500,000
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	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 D	86,916,373	25	84,750,046
	26 Total liabilities. Add lines 17 through 25	93,197,627	26	97,251,210
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,648,173	27	37,748,917
	28 Temporarily restricted net assets	0	28	0
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	2,648,173	33	37,748,917	
34 Total liabilities and net assets/fund balances	95,845,800	34	135,000,127	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	168,251,797
2	Total expenses (must equal Part IX, column (A), line 25)	2	140,489,972
3	Revenue less expenses Subtract line 2 from line 1	3	27,761,825
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,648,173
5	Net unrealized gains (losses) on investments	5	-132,502
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	7,471,421
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	37,748,917

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		No
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?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

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) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LEE SAUNDERS PRESIDENT	35 0 0 0	X		X				334,212	0	95,059
LAURA REYES SECRETARY-TREASURER	35 0 0 0	X		X				270,387	0	109,839
KEN ALLEN INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				17,700	0	0
RICHARD L CAPONI INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				5,367	0	0
KENNETH DEITZ INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
GREG DEVEREUX INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				17,800	0	0
DANNY DONOHUE INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
DAVID R FILLMAN INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				17,100	0	0
MICHAEL FOX INTL VICE PRESIDENT (RETIRED)	3 0 0 0	X		X				9,800	0	0
KATHLEEN P GARRISON INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MATTIE R HARRELL INTERNATIONAL VICE PRESIDENT	3 0	X		X				17,000	0	0
JOHANNA P HESTER INTERNATIONAL VICE PRESIDENT	3 0	X		X				16,800	0	0
DANNY J HOMAN INTERNATIONAL VICE PRESIDENT	3 0	X		X				16,800	0	0
MELVIN HUGHES SR INTERNATIONAL VICE PRESIDENT	3 0	X		X				18,164	0	0
SALVATORE LUCIANO INTERNATIONAL VICE PRESIDENT	3 0	X		X				16,800	0	0
JOHN A LYALL INTERNATIONAL VICE PRESIDENT	3 0	X		X				16,800	0	0
KATHRYN LYBARGER INTERNATIONAL VICE PRESIDENT	3 0	X		X				17,300	0	0
ROBERTA LYNCH INTERNATIONAL VICE PRESIDENT	3 0	X		X				16,800	0	0
CHRISTOPHER A MABE INTERNATIONAL VICE PRESIDENT	3 0	X		X				16,800	0	0
GLENARD S MIDDLETON SR INTERNATIONAL VICE PRESIDENT	3 0	X		X				16,800	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RALPH MILLER INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
GARY MITCHELL INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
VICTORIA E MITCHELL INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
DOUGLAS MOORE INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
FRANK MORONEY INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
MICHAEL NEWMAN INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
HENRY NICHOLAS INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
RANDOLPH P PERREIRA INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
STEVEN QUICK SR INTERNATIONAL VICE PRESIDENT	3 0 0 0	X		X				16,800	0	0
LILLIAN ROBERTS INTL VICE PRESIDENT (RETIRED)	3 0 0 0	X		X				16,800	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
EDWARD RODRIQUEZ INTERNATIONAL VICE PRESIDENT	30	X		X				16,800	0	0
LAWRENCE A ROEHRIG INTERNATIONAL VICE PRESIDENT	30	X		X				16,800	0	0
JOSEPH RUGOLA INTERNATIONAL VICE PRESIDENT	30	X		X				16,800	0	0
ELIOT SEIDE INTERNATIONAL VICE PRESIDENT	30	X		X				17,400	0	0
MARY SULLIVAN INTERNATIONAL VICE PRESIDENT	30	X		X				17,100	0	0
BRAULIO TORRES INTERNATIONAL VICE PRESIDENT	30	X		X				16,800	0	0
JEANETTE WYNN INTL VICE PRESIDENT (RETIRED)	30	X		X				16,800	0	0
PAUL BOOTH EXECUTIVE ASST TO PRESIDENT	350				X			256,691	0	116,493
STEPHAN FANTAUZZO CHIEF OF STAFF TO PRESIDENT	350				X			256,274	0	98,431
CHARLES JURGONIS DIRECTOR, FINANCIAL SERVICES	350				X			226,589	0	91,625

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM LURYE GENERAL COUNSEL	35 0 0 0				X			220,174	0	95,938
STEVEN GRETSUK DIRECTOR, INFO SYSTEMS	35 0 0 0				X			211,815	0	150,998
MICHAEL SUKAL DIRECTOR, ORG & FIELD SERVICES	35 0 0 0				X			200,447	0	142,593
JESSICA WEINSTEIN ASSISTANT TO THE PRESIDENT	35 0 0 0				X			193,666	0	109,920
WILLIAM WILKINSON ASSISTANT DIRECTOR, RESEARCH	35 0 0 0					X		323,850	0	64,910
RICHARD ABELSON CHAIRPERSON, JUDICIAL PANEL	35 0 0 0					X		218,689	0	504,632
EDGAR DE JESUS AREA ORGANIZING DIRECTOR	35 0 0 0					X		192,421	0	116,387
JOSEPH GUZYNSKI REGIONAL DIRECTOR	35 0 0 0					X		189,670	0	143,336
ELISSA MCBRIDE DIRECTOR, EDUCATION	35 0 0 0					X		188,953	0	151,615
RAGLAN GEORGE JR INTERNATIONAL VICE PRESIDENT	3 0 0 0						X	70,000	0	0

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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" on 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" on 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" on 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

Table with 2 columns: Name of the organization (AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES) and Employer identification number (53-0237789)

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
2 Political expenditures \$ 680,576
3 Volunteer hours

Part 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

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b \$
4 Did the filing organization file Form 1120-POL for this year? [] Yes [x] No
5 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

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received. Includes rows for AFSCME PEOPLE CONTRIBUTIONS CMTE and AFSCME SPECIAL ACCOUNT.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals

(b) Affiliated group totals

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a. If zero or less, enter -0-

i Subtract line 1f from line 1c. If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes No

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a)2012	(b)2013	(c)2014	(d)2015	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2015
Open to Public Inspection

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

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

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 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 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
a Total number of conservation easements	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included in (a)	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ \$ _____

8 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)? Yes No

9 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 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

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

(continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years 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 current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		24,496,754	23,112,365	1,384,389
e Other		7,325,817	6,697,748	628,069
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				2,012,458

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	184,855,731
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-132,502
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	16,736,436
e	Add lines 2a through 2d	2e	16,603,934
3	Subtract line 2e from line 1	3	168,251,797
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	168,251,797

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	143,786,980
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	3,297,008
e	Add lines 2a through 2d	2e	3,297,008
3	Subtract line 2e from line 1	3	140,489,972
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	140,489,972

Part XIII Supplemental Information

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

Return Reference	Explanation
PART X, LINE 2 - FIN 48 FOOTNOTE	Accounting principles generally accepted in the United States of America require management to evaluate income tax positions taken and accrue an income tax liability if the Federation has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service Management has evaluated the income tax positions taken and concluded that as of December 31, 2015, there are no uncertain positions taken or expected to be taken that would require accrual of a liability in the consolidated financial statements AFSCME and its affiliated entities are subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress

Part XIII Supplemental Information (continued)

Return Reference	Explanation
PART XII, LINE 2D - EXPENSES INCLUDED ON FINANCIALS, NOT ON FORM 990	\$ (7,547,000) POSTRETIREMENT-RELATED CHANGES \$ 10,768,429 EXPENSES - RELATED ORGANIZATIONS \$ 75,579 LOSS RECOGNIZED UNDER THE EQUITY METHOD OF ACCOUNTING ----- \$ 3,297,008 =====

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2015

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.**

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

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 General Information on Activities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)					
(2)					
(3)					
(4)					
(5)					
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					

Part II Grants and Other Assistance to Organizations or Entities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Europe (Including Iceland and Greenland)	PSI AID FUND NEPAL	10,000	CHECK			
(2)									
(3)									
(4)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____ 1

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* Yes No

Additional Data

Software ID:

Software Version:

EIN: 53-0237789

Name: AMERICAN FEDERATION OF STATE COUNTY
AND MUNICIPAL EMPLOYEES

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule I (Form 990)

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

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Information about Schedule I (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

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Row 1 contains 'See Additional Data Table'.

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) FAMILY SCHOLARSHIP PROGRAM	37	74,000			
(2) JERRY CLARK MEMORIAL SCHOLARSHIP	4	20,000			
(3) Gerald W McEntee Scholarship	1	5,000			

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
PART I - LINE 2 - PROCEDURE FOR MONITORING USE OF 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 AWARDDING 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 THE GERALD W MCENTEE SCHOLARSHIP IS AWARDED TO A MEMBER OF AFSCME THAT EXEMPLIFIES COMMITMENT TO STRENGTHENING THE UNION THROUGH ORGANIZING, DEFENDING WORKERS RIGHTS, BUILDING POLITICAL POWER FOR WORKING FAMILIES AND SUPPORTING PUBLIC SERVICES AFSCME DOES NOT MONITOR THE USE OF THE FUNDS UPON AWARDDING, BUT DOES LIMIT THE MEMBER TO ONLY A ONE-TIME AWARD

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A Philip Randolph Institute 815 16th Street NW 3rd Floor Washington DC, DC 20006	13-6180232	501c4	10,000				Sponsorship
AFL-CIO Secretary Treasurer 815 16th Street NW Washington, DC 20006	53-0228172	501c5	439,000				General Support
Alliance For Justice 11 Dupont Circle NW Suite 200 Washington, DC 20036	52-1009973	501c3	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alliance For Retired Americans 815 16th Street NW 4th Floor North Washington, DC 20006	52-2277805	501c4	67,500				General Support
America Votes 1155 Connecticut Avenue NW Suite 600 Washington, DC 20036	83-0364856	501C4	375,000				Public Interest
America Works USA 1401 K Street NW Suite 200 Washington, DC 20005	45-2315353	501c4	500,000				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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Association of Classified School Employee 555 New Jersey Avenue NW Washington, DC 20001	31-1000006	501C6	12,000				Education
American Constitution Society for Law & Policy 1333 H Street NW 11th Floor Washington, DC 20005	52-2313694	501c3	10,000				Sponsorship
American Family Voices 1250 Eye Street NW Suite 250 Washington DC, DC 20005	52-2257357	501c4	6,000				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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Americans United for Change 455 Massachusetts Ave NW Suite 400 Washington, DC 20001	03-0556312	501c4	1,000,000				General Support
APALA - Asian Pacific American Labor Alliance 815 16th Street NW Washington, DC 20006	52-1777961	501c5	10,000				Sponsorship
Ballot Initiative Strategy Ctr 1815 Adams Mill Road NW Suite 300 Washington, DC 20009	04-3411708	501c4	90,000				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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Baylor University 50 Room 97048 Waco, TX 76798	74-1159753	501c3	13,640				SCHOLARSHIP PROGRAM
Bill Press Partners LLC 217 8th Street SE Washington, DC 20003	20-2926202		25,000				General Support
Blogger Power dba Netroots Nation 4741 Central Street Suite 377 Kansas, MO 64112	20-4465717	501c3	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
California Legislative Black Caucus Policy Institu 921 11th Street Suite 904 Sacramento, CA 95814	26-3911734	501c3	50,000				Sponsorship
California Works Speaker Toni Atkins Ballot Measu 330 Encinitas Boulevard Suite 101 Encinitas, CA 92024	46-4000406		75,000				Program Support
Californians for Fair Tax Policy 1100 O Street Suite 200 Sacramento, CA 95814	47-5223978		10,000				Program 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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Campaign For America's Future 1825 K Street NW Suite 400 Washington, DC 20006	52-1861766	501c4	10,000				Sponsorship
Center For American Progress 1333 H Street NW Washington, DC 20005	30-0126510	501c3	250,000				Sponsorship
Center for Economic and Policy Research 1611 Connecticut Avenue NW Suite 400 Washington, DC 20009	52-2204029	501C3	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Center for Effective Government 2040 S Street NW 2nd Floor Washington, DC 20009	52-1302617	501c3	25,000				General Support
Citizens For Tax Justice 1616 P Street NW Suite 200 Washington, DC 20036	52-1156415	501c4	100,000				Public Interest
Coalition Of Black Trade Unionists 1155 Connecticut Avenue NW Suite 500 Washington, DC 20036	52-1128179	501c5	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Coalition On Human Needs 1015 18th Street NW Suite 1101 Washington, DC 20036	26-5680984	501c3	11,500				General Support
Coalition to Stop Fast Track 815 16th Street NW Washington, DC 20006	47-2965424		100,000				Program Support
ColorOfChangeorg Education Fund 1714 Franklin Street Suite 100-136 Oakland, CA 94612	45-5569879	501c3	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Committee For Education Funding 1341 G Street NW 5th Floor Washington, DC 20005	52-0891509	501c4	10,000				General Support
Committee on States 1575 I Street NW Suite 425 Washington, DC 20005	26-3815183		525,000				General Support
Congressional Black Caucus Foundation Inc 1720 Massachusetts Avenue NW Washington, DC 20036	52-1160561	501c3	35,000				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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Congressional Black Caucus Institute 413 New Jersey Avenue SE WASHINGTON, DC 20003	52-2270607	501c4	25,000				Sponsorship
Congressional Hispanic Caucus Institute Inc 1128 16th Street NW Washington, DC 20036	52-0114225		6,000				Sponsorship
Democracy Alliance 1575 I Street NW Suite 425 Washington, DC 20005	20-2130918		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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Economic Policy Institute 1225 Eye Street NW Suite 600 Washington, DC 20005	52-1368964	501c3	174,000				Think Tank
Fair Elections Legal Network LLC 1825 K Street NW Suite 450 Washington, DC 20006	20-5087102		85,500				Public Interest
Florida Alliance 650 Ocean Drive Suite 350 Key Biscayne, FL 33149	26-4663278		50,000				Program 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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gay & Lesbian Victory Fund 1133 15th Street NW Suite 350 Washington, DC 20005	52-1729701		6,000				Program Support
Good Jobs First 1616 P Street NW Suite 210 Washington, DC 20036	82-0542649	501c3	30,000				Public Policy
Harvard University 1350 Massachusetts Avenue Suite 953 Cambridge, MA 02138	04-2103580	501c3	10,000				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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Innovation Ohio 35 E Gay Street Suite 260 Columbus, OH 43215	27-4562062	501c4	50,000				General Support
Jobs With Justice 1616 P Street NW Suite 150 Washington, DC 20036	52-1865575	501c3	75,000				Public Interest
Midwest Academy 27 E Monroe Street 11th Floor Chicago, IL 60603	36-2776406	501c3	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Moveonorg Civic Action PO Box 96141 Washington, DC 200906141	06-1553389	501c4	10,000				Program Support
National Action Network 106 W 145th Street New York, NY 10039	11-3269182	501c4	50,000				General Support
National Public Pension Coalition 1900 L Street NW Suite 900 Washington, DC 20036	20-5939282	501c4	164,000				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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NCSL Foundation for State Legislatures 7700 E First Place Denver, CO 80230	74-2232576	501c3	12,500				Sponsorship
NETWORK 25 E Street NW Suite 200 Washington, DC 20001	52-0984255	501c4	30,000				General Support
New Venture Fund 1201 Connecticut Avenue NW Suite 300 Washington, DC 20036	20-5806345	501c3	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
North Carolina State Conference of the NAACP PO Box 335 Durham, NC 27702	56-6061662	501c3	50,000				Sponsorship
Partnership for Working Families 1825 K Street NW Suite 210 Washington, DC 20006	71-0914032	501c3	300,000				General Support
Peggy Browning Fund 100 S Broad Street Suite 1208 Philadelphia, PA 19110	23-2887086	501c3	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Planned Parenthood Federation of America 1110 Vermont Avenue NW Suite 300 Washington, DC 20001	13-3539048	501c4	10,000				Sponsorship
Pride At Work 815 16th Street NW Washington, DC 20006	52-2217817		10,000				Sponsorship
Progressive Congress 600 Pennsylvania Ave SE Washington, DC 20003	20-3714244	501c3	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Progress Now 5922 Excelsior Boulevard St Louis Park, MN 55416	20-8720230	501c4	50,000				Public Policy
Roosevelt Institute 570 Lexington Avenue 5th Floor New York, NY 10022	23-7213592	501c3	110,000				Sponsorship
Samuel Dewitt Proctor Conference Inc 4533 S Lake Park Avenue Chicago, IL 60653	06-1707903	501c3	30,000				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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Service Employees International Union 1800 Massachusetts Avenue NW Washington, DC 20036	36-0852885	501c5	106,915				General Support
Texas Future Project LLC PO Box 684554 Austin, TX 78768	46-4235661		25,000				General Support
The Accountabilty Project 888 16th Street NW Suite 650 Washington, DC 20006	32-0470290	501c4	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Advocacy Fund 570 Lexington Avenue 5th Floor New York, NY 10022	94-3153687	501c4	25,000				General Support
The American Prospect Inc 1225 Eye Street NW Suite 600 Washington, DC 20005	52-1617061	501c3	25,000				General Support
The Leadership Conference On Civil & Human Rights 1629 K Street NW 10th Floor Washington, DC 20006	52-0789800	501c4	45,000				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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Nation Institute 162 W 54th Street Suite 4A-C New York, NY 10019	13-6216903	501c3	10,000				Sponsorship
The National Women's Law Center 11 Dupont Circle NW Suite 800 Washington, DC 20036	52-1213010	501c3	10,000				Sponsorship
The National Women's Law Center Action Fund 11 Dupont Circle NW Suite 800 Washington DC, DC 20036	46-0639645	501c4	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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United Students Against Sweatshops 1155 Connecticut Avenue NW Suite 500 Washington, DC 20036	52-2094677	501c3	15,000				Sponsorship
US Action 1101 17th Street NW Suite 1220 Washington, DC 20036	52-2143105	501c4	100,000				General Support
Working America 815 16th Street NW Washington, DC 20006	20-0263611	501c4	1,130,600				Program 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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEAFARERS INTERNATIONAL UNION 5201 AUTH WAY CAMP SPRINGS, MD 20746	11-1975660	501c5	10,000				EL FARO ASSISTANCE

**Schedule J
(Form 990)**

Compensation Information

OMB No 1545-0047

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

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

▶ Attach to Form 990.

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

2015

Open to Public Inspection

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 Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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.
- 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?
- 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.
- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |
- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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 on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
- If "Yes," on line 5a or 5b, describe in Part III.
- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
- If "Yes," on line 6a or 6b, describe in Part III.
- 7** For persons listed on 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.
- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.
- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	Yes	
2	Yes	
4a	Yes	
4b		No
4c		No
5a		
5b		
6a		
6b		
7		
8		
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 on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

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

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
PART I, LINE 1A - ITEMS PROVIDED TO PERSONS LISTED FORM 990, PART VII	FIRST-CLASS TRAVEL ----- TWO OFFICERS (AND CERTAIN EXECUTIVE STAFF AS AUTHORIZED) MAY TRAVEL FIRST CLASS ON OFFICIAL UNION BUSINESS WHICH IS NOT DEEMED TAXABLE COMPENSATION TAX INDEMNIFICATION AND GROSS-UP/HOUSING ALLOWANCE ----- REIMBURSEMENT FOR HOUSING, TRANSPORTATION AND PER DIEM (INCLUDING TAX GROSS-UP) FOR OUT OF TOWN ASSIGNMENT GREATER THAN ONE YEAR CONSIDERED TAXABLE COMPENSATION
PART I, LINE 4A - SEVERANCE PAYMENTS	SEVERANCE PAYMENTS ----- WILLIAM WILKINSON \$166,762
PART II, COLUMN C - DEFERRED COMPENSATION	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

Additional Data

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 W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 LEE SAUNDERS PRESIDENT	(i)	307,597		26,615	64,083	36,010	434,305	0
	(ii)	0			0	0	0	0
1 LAURA REYES SECRETARY-TREASURER	(i)	258,440		11,947	78,863	35,265	384,515	0
	(ii)	0			0	0	0	0
2 RAGLAN GEORGE JR INTERNATIONAL VICE PRESIDENT	(i)	70,000			0	0	70,000	0
	(ii)	0			0	0	0	0
3 PAUL BOOTH EXECUTIVE ASST TO PRESIDENT	(i)	238,434		18,257	85,517	34,846	377,054	0
	(ii)	0			0	0	0	0
4 STEPHAN FANTAUZZO CHIEF OF STAFF TO PRESIDENT	(i)	245,035		11,239	67,455	34,976	358,705	0
	(ii)	0			0	0	0	0
5 CHARLES JURGONIS DIRECTOR, FINANCIAL SERVICES	(i)	212,112		14,477	60,649	34,531	321,769	0
	(ii)	0			0	0	0	0
6 WILLIAM LURYE GENERAL COUNSEL	(i)	211,992		8,182	64,962	34,441	319,577	0
	(ii)	0			0	0	0	0
7 STEVEN GRETSUK DIRECTOR, INFO SYSTEMS	(i)	205,048		6,767	120,022	34,328	366,165	0
	(ii)	0			0	0	0	0
8 MICHAEL SUKAL DIRECTOR, ORG & FIELD SERVICES	(i)	193,940		6,507	111,617	34,096	346,160	0
	(ii)	0			0	0	0	0
9 JESSICA WEINSTEIN ASSISTANT TO THE PRESIDENT	(i)	190,095		3,571	78,944	34,022	306,632	0
	(ii)	0			0	0	0	0
10 WILLIAM WILKINSON ASSISTANT DIRECTOR, RESEARCH	(i)	131,388		192,462	33,934	33,070	390,854	0
	(ii)	0			0	0	0	0
11 RICHARD ABELSON CHAIRPERSON, JUDICIAL PANEL	(i)	208,580		10,109	494,294	13,827	726,810	0
	(ii)	0			0	0	0	0
12 EDGAR DE JESUS AREA ORGANIZING DIRECTOR	(i)	128,985		63,436	85,411	33,070	310,902	0
	(ii)	0			0	0	0	0
13 JOSEPH GUZYNSKI REGIONAL DIRECTOR	(i)	156,028		33,642	112,360	33,589	335,619	0
	(ii)	0			0	0	0	0
14 ELISSA MCBRIDE DIRECTOR, EDUCATION	(i)	182,472		6,481	120,639	33,962	343,554	0
	(ii)	0			0	0	0	0

**SCHEDULE O
(Form 990 or
990-EZ)**

Department of the
Treasury
Internal Revenue
Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

2015

**Open to Public
Inspection**

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	The International Executive Board shall create from its membership an Executive Committee. The Executive Committee shall be composed of the International President, who shall serve as Chairperson, the International Secretary-Treasurer, who shall serve as Secretary, and three other members, who shall be elected by and from the members of the International Executive Board. The Executive Committee shall meet on the call of the International President. Except as hereafter limited, the Executive Committee shall have the power to act on all matters on which the International Executive Board is empowered to act, subject to the approval of the International Executive Board at its next meeting. The Executive Committee shall not have the power to levy special assessments or to fill vacancies in the membership of the International Executive Board.
PART VI, SECTION A, LINE 6 - MEMBERS	AFSCME is comprised of members with the right to elect their delegates, who elect the governing body.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION A, LINE 7A - ELECTING OF BOARD MEMBERS	ALL SOVEREIGN POWERS OF THE FEDERATION ARE VESTED IN THE DELEGATION WHO COMPRISE THE CONVENTION, WHEN IN SESSION THE FEDERATION HOLDS A BI-ANNUAL CONVENTION THAT IS ATTENDED BY DELEGATES THE DELEGATES ELECT THE OFFICERS OF THE FEDERATION EVERY FOUR YEARS THESE OFFICERS 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

990 Schedule O, Supplemental Information

Return Reference	Explanation
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 CONSOLIDATED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC
PART VII, SECTION A, COLUMN (F) - ESTIMATED AMOUNT OF OTHER COMPENSATION	\$1,578,750 OF COLUMN F AMOUNT REPRESENTS THE INCREASE IN ACTUARIAL VALUE IN DEFINED BENEFITS CALCULATED BY THE PLAN ACTUARY THESE AMOUNTS REPORTED ARE NOT ACTUAL OUTLAYS TO THE OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED EMPLOYEES

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS	\$7,547,000 POSTRETIREMENT-RELATED CHANGES \$ (75,579) LOSS RECOGNIZED UNDER THE EQUITY METHOD OF ACCTG ----- \$7,471,421 TOTAL OTHER CHANGE IN NET ASSETS =====

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

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

Attach to Form 990.

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

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.

Table with 6 columns: (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. Row 1: (1) AFSCME PUBLIC SERVICE WORKERS LLC, 1625 L STREET NW, WASHINGTON, DC 20036, 20-4455454; INVESTMENT; DE; 225,000; AFSCME.

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

Table with 7 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Exempt Code section; (e) Public charity status (if section 501(c)(3)); (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity? (Yes/No). Row 1: 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 34 because it had one or more related organizations treated as a partnership 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) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
AFSCME PUBLIC SERVICE (1) WORKERS CORP 1625 L STREET NW WASHINGTON, DC 20036 20-4449100	INVESTMENT	DE	AFSCME	C-CORP			100 000 %	Yes	

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- 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)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** 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)

	Yes	No
1a		No
1b	Yes	
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n	Yes	
1o	Yes	
1p		No
1q	Yes	
1r	Yes	
1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(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	B	5,093,383	ALLOCATION
(2) AFSCME EMPLOYEES PENSION PLAN TRUST FUND	O	239,386	BILLINGS
(3) AFSCME SPECIAL ACCOUNT	Q	297,709	BILLINGS
(4) AFSCME EMPLOYEES SALARY SAVINGS PENSION TRUST	R	1,718,280	WITHHOLDINGS

Part VII **Supplemental Information**

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

Return Reference	Explanation
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Additional Data

Software ID:
Software Version:
EIN: 53-0237789
Name: AMERICAN FEDERATION OF STATE COUNTY
AND MUNICIPAL EMPLOYEES

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

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