

**AMERICAN FEDERATION OF STATE, COUNTY
AND MUNICIPAL EMPLOYEES, AFL-CIO
1625 L Street NW, Washington, DC 20036**

Lee Saunders
President

Elissa McBride
Secretary-Treasurer

**LOCAL UNION ANNUAL FINANCIAL REPORT
FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2025
OR THE FISCAL YEAR ENDED _____, 2026**

INSTRUCTIONS

This report is to be prepared, signed, and submitted to Secretary-Treasurer Elissa McBride by mail or electronically by following the instructions at www.afscmetreasurer.org/forms. A copy of the report should be retained in the local union files. For those locals operating on a calendar year (January through December) fiscal period, the report is due no later than May 15 of each year. For those locals who have a fiscal period other than a calendar year, the report must be filed within 4½ months after the end of their fiscal year. Retiree Chapters and Retiree Subchapters are not required to fill out this report.

PART I – Description of Financial Records and Procedures

Answer each of the following questions regarding the financial records and procedures of the local union. If additional space is needed for your answers, please use the space provided on page 4, attach additional sheets as necessary and refer to the appropriate question or line number.

General

1. a. Local Union # _____ b. Affiliated with Council # _____
c. Current # of Members _____ d. Employer Identification # _____
e. Local Union Name _____
f. Street Address or P.O. Box # _____
g. City _____ h. State _____ i. Zip Code _____

2. The local union financial records are in the custody of:

Name _____
Address _____
Cell Phone Number* (including area code) _____
Daytime Number (including area code) _____
Personal and/or Union Email _____

Chapters

3. Does the local have chapters or other divisions? Yes _____ No _____
If YES, how many? _____
Also attach list of chapters with locations and names of chapter chairpersons.

Expenditures- Spending

4. Are all disbursements authorized by two officer signatures? Yes _____ No _____
5. Does your local have a petty cash fund? Yes _____ No _____
If YES, what is the maximum fund kept on hand? \$ _____

* By providing your cell phone number you consent to receive calls (including recorded or autodialed calls, or texts) at that number from AFSCME and its affiliated labor, political, and charitable organizations on any subject matter. Your carrier's rates may apply. You may modify your preferences at <https://www.afscme.org/tcpa>

Reporting

6. Are monthly financial reports prepared? Yes _____ No _____

If YES, please attach a copy of the most recent report.

7. Does the local pay salaries, lost time, allowances, and/or reimbursed dues to officers and/or employees? Yes _____ No _____

If YES, do you prepare or have a payroll service that prepares and files the following payroll tax forms?

IRS Form 940	Yes _____	No _____
IRS Form 941	Yes _____	No _____
IRS Form W-2	Yes _____	No _____

8. Is IRS Form 990, 990-EZ or the 990-N e-postcard filed annually? Yes _____ No _____

9. Does the local have any dues paying members who are private sector employees? Yes _____ No _____

If YES, is a Department of Labor LM report filed? Yes _____ No _____

Political Contributions Reporting

10. Does the local make political contributions? Yes _____ No _____
If NO, proceed to question 14.

11. What were the total contributions during the last calendar year? \$ _____

12. Does the local use a “Separate Segregated Fund” for making political contributions? Yes _____ No _____

13. Is your local aware of the filing requirements for IRS Form 1120-POL? Yes _____ No _____

Audits

Please attach a copy of your last audit report (including any “Trustees” report)

14. How often does your local have an audit? _____

15. Are audit findings reported to the membership? Yes _____ No _____

16. Who performs these audits? Trustees _____ CPA _____

Other (Explain) _____

PART II – Dues

1. For locals with FIXED dues rate(s), what is (are) the current monthly rates? Full time \$ _____
Part time \$ _____

2. For locals with PERCENTAGE dues rate(s): What is the current percentage? _____ %
What is the Average Monthly rate per member? \$ _____

3. For other dues structures, check here _____ and attach an explanation.

4. The local receives dues from: Employer _____ Council _____

PART III – Financial Statements

All local unions must complete the information requested in the “Statement of Receipts and Disbursements” below and “Statement of Assets Owned and Debts Outstanding (Liabilities)” on page 4. If the local retains a CPA or Public Accountant, the Accountant’s annual financial statement(s) may be substituted for pages 3 and 4 ONLY IF the local completes page 1 and page 2 of this report, and the local’s President and Secretary-Treasurer sign and date page 4.

STATEMENT OF RECEIPTS AND DISBURSEMENTS

Receipts During Year

1. Dues received directly from employer: \$ _____
2. Local share of dues forwarded directly from Council: _____
3. Insurance premiums collected from members: _____
4. Other receipts (Attach list – fundraisers, interest, initiation fees, etc.) _____
5. **TOTAL RECEIPTS (Add items 1 through 4):** \$ _____

Disbursements During Year

6. Affiliation Fees and Per Capita Tax paid directly by local to:
International _____
Council _____
Other Labor Bodies _____
7. Surety Bond Premium: _____
8. Accounting/Legal/Arbitrations: _____
9. Negotiations: _____
10. Salaries/Lost Time/Allowances: _____
11. Payroll Taxes: _____
12. Reimbursed Dues: _____
13. Officer Reimbursed Expenses: _____
14. Conferences/Conventions: _____
15. Picnics/Parties: _____
16. Rent/Utilities: _____
17. Printing/Copying: _____
18. Office Supplies: _____
19. All Other Disbursements (Attach List): _____
20. **TOTAL DISBURSEMENTS (Add items 6 through 19):** \$ _____
21. **EXCESS (DEFICIT) RECEIPTS OVER DISBURSEMENTS FOR YEAR** \$ _____

STATEMENT OF ASSETS OWNED AND DEBTS OUTSTANDING (LIABILITIES)

ASSETS OWNED

A

B

_____ Beginning of Year

End of Year

22.	Cash In Banks			
	Bank Name	Acct Type	Account Number	\$ _____
	_____	_____	_____	\$ _____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
23.	TOTAL CASH ASSETS (Note- B less A should Equal page 3, line 21		\$ _____	\$ _____
24.	Other Assets (Attach List- Investments, Furniture, etc.)		\$ _____	\$ _____
25.	TOTAL ASSETS (Add Lines 23 and 24)		\$	\$

DEBTS OUTSTANDING (LIABILITIES)

26. Unpaid Bills (Attach List) \$ _____ \$ _____

27. **NET ASSETS** (Line 25 minus Line 26) \$ _____ \$ _____

Please use this space to explain answers or prepare lists as necessary.

Question Number Additional Explanations

We certify to the best of our knowledge, the information in this report is true and correct, and that all financial activities of the local union are included in the financial statements.

Signature of Current President

Date

Signature of Current Secretary-Treasurer

Date

(if filling out this form electronically, typed names will be treated as signatures)

Who completed this report? (Please print) _____
Has this individual attended an AFSCME Secretary-Treasurer's
Educational workshop within the last two years? Yes No