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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2007

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning 01-01-2007 and ending 12-31-2007

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: AMERICAN POSTAL WORKERS UNION AFL-CIO. Number and street: 1300 L STREET NW. City or town: WASHINGTON, DC 20005

D Employer identification number: 52-0913725. E Telephone number: (202) 842-4215. F Accounting method: Other (specify) MODIFIED CASH

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Web site: www.apwu.org

J Organization type: 501(c) (5)

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000

L Gross receipts: 67,825,261

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? H(b) If "Yes" enter number of affiliates. H(c) Are all affiliates included? H(d) Is this a separate return filed by an organization covered by a group ruling? I Group Exemption Number. M Check if the organization is not required to attach Sch B


Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Gross amount from sales of assets, Special events and activities, Gross sales of inventory, Other revenue, Total revenue, Program services, Management and general, Fundraising, Payments to affiliates, Total expenses, Excess or (deficit) for the year, Net assets or fund balances at beginning of year, Other changes in net assets, Net assets or fund balances at end of year.

**Part II Statement of Functional Expenses**

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>			
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>			
<b>23</b> Specific assistance to individuals (attach schedule)	<b>23</b>			
<b>24</b> Benefits paid to or for members (attach schedule)	<b>24</b>			
<b>25a</b> Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule) . . . . .	<b>25a</b> 10,420,942			
<b>b</b> Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule) . . . . .	<b>25b</b>			
<b>c</b> Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	<b>25c</b>			
<b>26</b> Salaries and wages of employees not included on lines 25a, b and c . . . . .	<b>26</b> 6,884,819			
<b>27</b> Pension plan contributions not included on lines 25a, b and c . . . . .	<b>27</b> 6,040,060			
<b>28</b> Employee benefits not included on lines 25a - 27 . . . . .	<b>28</b> 2,771,215			
<b>29</b> Payroll taxes . . . . .	<b>29</b> 1,318,815			
<b>30</b> Professional fundraising fees . . . . .	<b>30</b>			
<b>31</b> Accounting fees . . . . .	<b>31</b> 156,958			
<b>32</b> Legal fees . . . . .	<b>32</b> 1,880,840			
<b>33</b> Supplies . . . . .	<b>33</b> 472,006			
<b>34</b> Telephone . . . . .	<b>34</b> 535,050			
<b>35</b> Postage and shipping . . . . .	<b>35</b> 295,575			
<b>36</b> Occupancy . . . . .	<b>36</b> 3,375,617			
<b>37</b> Equipment rental and maintenance . . . . .	<b>37</b> 603,026			
<b>38</b> Printing and publications . . . . .	<b>38</b> 233,090			
<b>39</b> Travel . . . . .	<b>39</b> 1,676,180			
<b>40</b> Conferences, conventions, and meetings . . . . .	<b>40</b> 1,478,757			
<b>41</b> Interest . . . . .	<b>41</b>			
<b>42</b> Depreciation, depletion, etc (attach schedule) 	<b>42</b> 583,297			
<b>43</b> Other expenses not covered above (itemize)				
<b>a</b> See Additional Data Table	<b>43a</b>			
<b>b</b>	<b>43b</b>			
<b>c</b>	<b>43c</b>			
<b>d</b>	<b>43d</b>			
<b>e</b>	<b>43e</b>			
<b>f</b>	<b>43f</b>			
<b>g</b>	<b>43g</b>			
<b>44</b> <b>Total functional expenses.</b> Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15) . . . . .	<b>44</b> 50,927,171			

**Joint Costs.** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_




**Part III Statement of Program Service Accomplishments (See the instructions.)**

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

<p>What is the organization's primary exempt purpose? <input checked="" type="checkbox"/> <u>Organized Labor</u></p> <p>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</p>	<p><b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)</p>
<p><b>a</b> Implementation of national Collective Bargaining Agreement with US Postal Service for 300,000 members of bargaining unit, including negotiation &amp; grievance arb procedures</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>b</b> Organizing-Union solicits voluntary membership from employees of USPS &amp; from private contractors providing services to USPS</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>c</b> Education-Publication of monthly tabloid, bi-weekly newsletters &amp; other printed matter, conducting training programs in stewardship and Federal reporting, etc</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>d</b> Operation of APWU Health Plan (separate reporting entity) under FEHBA Program to provide health/medical insurance benefits to HP members</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . <input checked="" type="checkbox"/></p>	

**Part IV Balance Sheets (See the instructions.)**

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		<b>(A)</b>		<b>(B)</b>		
		Beginning of year		End of year		
Assets	<b>45</b> Cash—non-interest-bearing . . . . .		3,833,183	<b>45</b>	78,223	
	<b>46</b> Savings and temporary cash investments . . . . .			<b>46</b>	6,618,212	
	<b>47a</b> Accounts receivable . . . . .	<b>47a</b>	381,621			
	<b>b</b> Less allowance for doubtful accounts	<b>47b</b>		<b>47c</b>	381,621	
	<b>48a</b> Pledges receivable . . . . .	<b>48a</b>				
	<b>b</b> Less allowance for doubtful accounts	<b>48b</b>		<b>48c</b>		
	<b>49</b> Grants receivable . . . . .			<b>49</b>		
	<b>50a</b> Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .			<b>50a</b>		
	<b>b</b> Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule) . . . . .			<b>50b</b>		
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b>				
	<b>b</b> Less allowance for doubtful accounts	<b>51b</b>		<b>51c</b>		
	<b>52</b> Inventories for sale or use . . . . .			<b>52</b>		
	<b>53</b> Prepaid expenses and deferred charges . . . . .		342,953	<b>53</b>	1,929	
	<b>54a</b> Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		15,495,269	<b>54a</b>	18,155,300	
	<b>b</b> Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV			<b>54b</b>		
<b>55a</b> Investments—land, buildings, and equipment basis . . . . .	<b>55a</b>					
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>55b</b>		<b>55c</b>			
<b>56</b> Investments—other (attach schedule) . . . . .			<b>56</b>			
<b>57a</b> Land, buildings, and equipment basis	<b>57a</b>	14,570,992				
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>57b</b>	8,996,911	5,172,606	<b>57c</b> 	5,574,081	
<b>58</b> Other assets, including program-related investments (describe <input type="checkbox"/> _____ )			72,756	<b>58</b> 	80,374	
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .		24,916,767	<b>59</b>		30,889,740	
Liabilities	<b>60</b> Accounts payable and accrued expenses . . . . .		2,842,347	<b>60</b>	5,571,917	
	<b>61</b> Grants payable . . . . .			<b>61</b>		
	<b>62</b> Deferred revenue . . . . .			<b>62</b>		
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .			<b>63</b>		
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .			<b>64a</b>		
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .			<b>64b</b>		
	<b>65</b> Other liabilities (describe <input type="checkbox"/> _____ )		251,930	<b>65</b> 		663,358
<b>66 Total liabilities</b> Add lines 60 through 65 . . . . .		3,094,277	<b>66</b>		6,235,275	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74</b>					
	<b>67</b> Unrestricted . . . . .		21,822,490	<b>67</b>	24,654,465	
	<b>68</b> Temporarily restricted . . . . .			<b>68</b>		
	<b>69</b> Permanently restricted . . . . .			<b>69</b>		
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>					
	<b>70</b> Capital stock, trust principal, or current funds . . . . .			<b>70</b>		
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .			<b>71</b>		
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>72</b>		
	<b>73 Total net assets or fund balances</b> Add lines 67 through 69 <b>or</b> lines 70 through 72 (Column (A) <b>must</b> equal line 19 and column (B) <b>must</b> equal line 21) . . . . .		21,822,490	<b>73</b>		24,654,465
	<b>74 Total liabilities and net assets / fund balances</b> Add lines 66 and 73 . . . . .		24,916,767	<b>74</b>		30,889,740

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>a</b>	59,536,432
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12		
<b>1</b>	Net unrealized gains on investments . . . . .	<b>b1</b>	63,654
<b>2</b>	Donated services and use of facilities . . . . .	<b>b2</b>	
<b>3</b>	Recoveries of prior year grants . . . . .	<b>b3</b>	
<b>4</b>	Other (specify) <input type="checkbox"/> _____	<b>b4</b>	4,263,522
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	4,327,176
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	55,209,256
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b>		
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	
<b>2</b>	Other (specify) <input type="checkbox"/> _____	<b>d2</b>	1,597,624
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	4,327,176
<b>e</b>	<b>Total revenue</b> (Part I, line 12) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	56,806,880

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements . . . . .	<b>a</b>	54,982,087
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17		
<b>1</b>	Donated services and use of facilities . . . . .	<b>b1</b>	
<b>2</b>	Prior year adjustments reported on Part I, line 20 . . . . .	<b>b2</b>	
<b>3</b>	Losses reported on Part I, line 20 . . . . .	<b>b3</b>	
<b>4</b>	Other (specify) <input type="checkbox"/> _____	<b>b4</b>	3,446,470
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	3,446,470
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	51,535,617
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :		
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	
<b>2</b>	Other (specify) <input type="checkbox"/> _____	<b>d2</b>	1,724,574
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	1,724,574
<b>e</b>	<b>Total expenses</b> (Part I, line 17) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	53,260,191

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Additional Data Table				

<b>Part V-A Current Officers, Directors, Trustees, and Key Employees</b> <i>(continued)</i>		Yes	No
<b>75a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . . . .	15		
<b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) .	<b>75b</b>		No
<b>c</b> Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" . . . . . If "Yes," attach a statement that includes the information described in the instructions	<b>75c</b>		No
<b>d</b> Does the organization have a written conflict of interest policy? . . . . .	<b>75d</b>		No

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (If not paid enter -0- )	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

<b>Part VI Other Information</b> <i>(See the instructions.)</i>		Yes	No
<b>76</b> Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change . . . . .	<b>76</b>		No
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . . If "Yes," attach a conformed copy of the changes	<b>77</b>		No
<b>78a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	<b>78a</b>	Yes	
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>78b</b>	Yes	
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . .	<b>79</b>		No
<b>80a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . . . .	<b>80a</b>		No
<b>b</b> If "Yes," enter the name of the organization ▶ _____ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
<b>81a</b> Enter direct or indirect political expenditures (See line 81 instructions) . . . . .	<b>81a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>81b</b>		No

Part VI Other Information (continued)

Form 990 (2007) Part VI Other Information (continued)
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82b If "Yes," you may indicate the value of these items here
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter a Gross income from members or shareholders
87b Gross income from other sources
88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?
88b At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)?
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
89b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
89e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?
89f All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?
89g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?
90a List the states with which a copy of this return is filed
90b Number of employees employed in the pay period that includes March 12, 2007
91a The books are in care of SECRETARY-TREASURER Telephone no (202) 842-4215
1300 L STREET NW WASHINGTON DC
Located at WASHINGTON, DC ZIP + 4 20005
91b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?



**Part VI Other Information (continued)**

Yes No

**c** At any time during the calendar year, did the organization maintain an office outside of the United States? **91c**

Yes  No

If "Yes," enter the name of the foreign country

**92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here  and enter the amount of tax-exempt interest received or accrued during the tax year **92**

**Part VII Analysis of Income-Producing Activities (See the instructions.)**

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
<b>a</b> HEALTH PLAN SERVICE charge					5,141,852
<b>b</b> SALE OF SUPPLIES					345,762
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments	900004	553,783			48,374,196
<b>95</b> Interest on savings and temporary cash investments					
<b>96</b> Dividends and interest from securities			14	1,035,947	
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property					
<b>b</b> non debt-financed property			16	112,519	
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income					
<b>100</b> Gain or (loss) from sales of assets other than inventory			18	55,358	
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue <b>a</b> MISCELLANEOUS REVENUE					442,995
<b>b</b> ROYALTIES			15	427,057	
<b>c</b> FIDELITY BOND					317,411
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))		553,783		1,630,881	54,622,216
<b>105</b> Total (add line 104, columns (B), (D), and (E))					56,806,880

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)**

**Line No.** Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)

See Additional Data Table

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**

**(a)** Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**(b)** Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**NOTE:** If "Yes" to **(b)**, file Form 8870 and Form 4720 (see instructions).

**Part XI Information Regarding Transfers To and From Controlled Entities** Complete only if the organization is a controlling organization as defined in section 512(b)(13)

				Yes	No
<b>106</b> Did the reporting organization <b>make</b> any transfers <b>to</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity				Yes	
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a	AMERICAN POSTAL WORKERS HOLDING CORPORATION 1300 L STREET NW WASHINGTON, DC 20005	521975237	RENT EXPENSE	1,724,666	
b	TEXAS LLC 1300 L STREET NW WASHINGTON, DC 20005	510624578	CAPITAL CONTRIBUTION	778,368	
<b>Totals</b>				2,503,034	

				Yes	No
<b>107</b> Did the reporting organization <b>receive</b> any transfers <b>from</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
<b>Totals</b>				0	

		Yes	No
<b>108</b> Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?			No

**Please Sign Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of 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.

Signature of officer \_\_\_\_\_ Date 2008-08-07

TERRY STAPLETON SEC/TREAS  
Type or print name and title

<b>Paid Preparer's Use Only</b>	Preparer's signature _____	Date _____	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 CALIBRE CPA GROUP PLLC 1850 K STREET NW WASHINGTON, DC 20006			EIN _____ Phone no (202) 331-9880

**Additional Data****Software ID:****Software Version:****EIN:** 52-0913725**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO**Form 990, Part II, Line 43 - Other expenses not covered above (itemize):**

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>a</b> Assistance to affiliates	<b>43a</b>	798,813			
<b>b</b> Coalition of Labor Union Women (CLUW)	<b>43b</b>	37,229			
<b>c</b> Communications	<b>43c</b>	1,163,333			
<b>d</b> Computer and Data Processing	<b>43d</b>	467,794			
<b>e</b> Consulting	<b>43e</b>	253,358			
<b>f</b> Contract Negotiations	<b>43f</b>	1,547,659			
<b>g</b> COPA fund support	<b>43g</b>	256,779			
<b>h</b> Dues and Subscriptions	<b>43h</b>	72,007			
<b>i</b> Grievance Processing System	<b>43i</b>	61,709			
<b>j</b> Hearing Impaired Program	<b>43j</b>	91,531			
<b>k</b> INCOME AND PERSONAL PROPERTY TAXES	<b>43k</b>	323,772			
<b>l</b> Insurance	<b>43l</b>	949,886			
<b>m</b> INVESTMENT fees	<b>43m</b>	98,494			
<b>n</b> LOSS ON DISPOSAL OF PROPERTY & EQUIPMENT	<b>43n</b>	91,942			
<b>o</b> media campaign	<b>43o</b>	142,124			
<b>p</b> National Executive Board	<b>43p</b>	43,544			
<b>q</b> National Postal forum	<b>43q</b>	24,816			
<b>r</b> Non Postal Organizing Expenses	<b>43r</b>	566,714			
<b>s</b> CONTRIBUTIONS	<b>43s</b>	162,298			
<b>t</b> Miscellaneous	<b>43t</b>	225,001			
<b>u</b> Other Projects	<b>43u</b>	123,805			
<b>v</b> Post Office Women Equal Rights (POWER)	<b>43v</b>	131,871			
<b>w</b> Postal Reform Issue	<b>43w</b>	26,703			
<b>x</b> Arbitrator Fees - Prof Fees	<b>43x</b>	1,996,126			
<b>y</b> Promotional	<b>43y</b>	1,899,289			
<b>z</b> TEMPORARY HELP	<b>43z</b>	82,297			
<b>aa</b> TRUSTEESHIP EXPENSES	<b>43aa</b>	79,767			
<b>ab</b> Voter registration drive	<b>43ab</b>	25,290			
<b>ac</b> Membership Cards	<b>43ac</b>	66,907			
<b>ad</b> Election Expense	<b>43ad</b>	390,066			

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
WILLIAM BURRUS 1300 L Street NW Washington, DC 20005	PRESIDENT 40 00	149,703	30,885	0
CLIFFORD GUFFEY 1300 L Street NW Washington, DC 20005	EXECUTIVE VICE PRESIDENT 40 00	131,052	27,185	0
TERRY STAPLETON 1300 L Street NW Washington, DC 20005	SECRETARY-TREASURER 40 00	131,013	27,185	0
FRANK ROMERO 1300 L Street NW Washington, DC 20005	DIRECTORORGNZTN DEPT 40 00	112,320	37,764	0
GREG BELL 1300 L Street NW Washington, DC 20005	DIRECTORINDUSTRIAL REL 40 00	119,947	30,369	0
JAMES MCCARTHY 1300 L Street NW Washington, DC 20005	DIRECTORCLERK DIVISION 40 00	119,824	24,970	0
JOYCE ROBINSON 1300 L Street NW Washington, DC 20005	DIRECTORRSRCH & EDUC 40 00	112,360	23,345	0
JUDY BEARD 1300 L Street NW Washington, DC 20005	DIRECTORRETIREE DEPT 40 00	10,914	14,471	0
MICHAEL REID 1300 L Street NW Washington, DC 20005	DIRECTORLEGISLATIVE DEPT 40 00	119,947	39,190	0
ROBERT PRITCHARD 1300 L Street NW Washington, DC 20005	DIRECTORMOTOR VEHICLE 40 00	113,587	23,656	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
STEVE RAYMER 1300 L Street NW Washington, DC 20005	DIRECTOR MAINT DIV 40 00	113,587	43,342	0
WILLIAM KACZOR 1300 L Street NW Washington, DC 20005	DIRECTOR HEALTH PLAN 40 00	0	0	0
SUSAN CARNEY 1300 L Street NW Washington, DC 20005	DIRECTOR HUMAN REL 40 00	112,438	40,246	0
IDOWU BALOGUN 1300 L Street NW Washington, DC 20005	NATL REP AT LARGE MAINT 40 00	106,108	36,156	0
ELIZABETH POWELL 1300 L Street NW Washington, DC 20005	REG COOR NORTHEAST REG 40 00	99,664	20,972	0
FRANK SANDERS 1300 L Street NW Washington, DC 20005	REG COOR SOUTHERN REG 40 00	24,123	1,969	0
JAMES BURKE 1300 L Street NW Washington, DC 20005	REG COOR EASTERN REG 40 00	120,638	19,138	0
MICHAEL GALLAGHER 1300 L Street NW Washington, DC 20005	REG COOR EASTERN REG 40 00	91,524	19,267	0
OMAR GONZALEZ 1300 L Street NW Washington, DC 20005	REG COOR WESTERN REG 40 00	99,664	34,353	0
SHARYN STONE 1300 L Street NW Washington, DC 20005	REG COOR CENTRAL REG 40 00	99,664	30,089	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
WILLIAM SULLIVAN 1300 L Street NW Washington, DC 20005	REG COORSOUTHERN REG 40 00	99,664	20,972	0
GARY KLOEPFER 1300 L Street NW Washington, DC 20005	ASST DIR 'A' MAINT DIV 40 00	106,108	36,933	0
GREGORY SEE 1300 L Street NW Washington, DC 20005	ASST DIR 'B' MAINT DIV 40 00	106,108	22,176	0
MICHAEL FOSTER 1300 L Street NW Washington, DC 20005	ASST DIRMOTOR VEHICLE DIV 40 00	106,181	22,037	0
MICHAEL MORRIS 1300 L Street NW Washington, DC 20005	ASST DIR 'B' CLERK DIV 40 00	112,360	23,485	0
PATRICIA WILLIAMS 1300 L Street NW Washington, DC 20005	ASST DIR 'A' CLERK DIV 40 00	112,360	37,271	0
ROBERT STRUNK 1300 L Street NW Washington, DC 20005	ASST DIR 'C' CLERK DIV 40 00	112,360	23,485	0
STEVE ALBANESE 1300 L Street NW Washington, DC 20005	ASST DIRLEGISLATIVE DEPT 40 00	109,285	23,485	0
ANNE MARIE ROBBINS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	33,250	0
BILL MANLEY 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	35,394	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
BILLY WOODS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	37,489	0
BRIAN DUNN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,996	37,433	0
BRUCE BAILEY 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	19,045	0
CHARLES ROBBINS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	18,905	0
CHARLES SUNDGAARD 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	36,090	0
CHARLES WILCOX 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	79,123	17,389	0
CLAUDIA RICHARDSON 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	94,329	31,668	0
DALE LEON TATUM 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	18,905	0
DANIEL SOTO 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	32,015	0
DENNIS TAFF 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	33,324	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
DONALD FOLEY 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	88,291	19,045	0
DWIGHT JOHNSON 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	34,470	0
ELIZABETH SWIGERT 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,069	0
ERIC WILSON 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	65,307	19,170	0
FRANK GIORDANO 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	114,874	17,389	0
FRANK RIGIERO 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,112	27,809	0
JACK CRAWFORD 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,069	0
JAMES PATARINI 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	19,064	0	0
JAMES SCOGGINS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	33,013	0
JEFF KEHLERT 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	85,006	27,747	0



**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
JERRY MCILVAIN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,069	0
JIMMIE WALDON 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,404	0
JOHN CLARK 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,996	32,483	0
JOHN JACKSON 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,069	0
JOHN L BERNOVICH 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,069	0
JOSEPH LACAPRIA 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	34,669	0
LAMONT BROOKS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,996	27,662	0
LEONARD TRUJILLO 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	85,006	26,387	0
LINDA TURNEY 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,069	0
LYLE KRUETH 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	26,188	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
LYNN PALLAS-BARBER 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	19,045	0
MARILYN MEROW 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	18,905	0
MARTIN BARRON 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	27,075	0
MERLIE BELL 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	88,304	38,060	0
MORLINE GUILLORY 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	30,862	0
NANCY OLUMEKOR 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	26,826	0
NILDA CHOCK 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	18,905	0
PAMELA RICHARDSON 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	27,450	0
PAT DAVIS-WEEKS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	85,006	28,120	0
PAUL HERN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	19,045	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
PERCY HARRISON 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	63,634	20,688	0
PETER CORADI 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	31,632	0
RICHARD LOGAN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,069	0
RICHARD SHEPARD 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	34,031	1,689	0
ROBERT BLOOMER 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	88,291	37,339	0
ROBERT KESSLER 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	19,045	0
ROBERT ROMANOWSKI 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	9,854	2,069	0
RONALD NESMITH 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	115,139	17,160	0
RUSSELL BUGARY 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	38,065	0
RUSSELL KNEPP 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	19,045	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
SAM LIENBE 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	23,138	0
SHIRLEY JASPER 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	86,137	20,292	0
SHIRLEY MCLENNAN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	18,905	0
SHIRLEY TAYLOR 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	18,905	0
STEPHEN LUKOSUS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	33,324	0
STEVE ZAMANAKOS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	19,045	0
TERENCE FINNERTY 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	101,213	30,746	0
TERRY MARTINEZ 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	39,881	0
THOMAS OBRIEN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	19,045	0
THOMAS F MAIER 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,996	27,689	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
TROY RORMAN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,995	37,631	0
ULYSSES CONEWAY 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	19,045	0
VANCE ZIMMERMAN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,932	36,536	0
WILLIAM LASALLE 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	85,006	29,069	0
WILLIAM MELLEEN 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,933	26,897	0
WOODROW WILLIAMS 1300 L Street NW Washington, DC 20005	NATL BUSINESS AGENT 40 00	89,995	18,905	0
VINCENT TARDUCCI 1300 L Street NW Washington, DC 20005	TEMP NATL BUSINESS AGENT 40 00	36,961	0	0

**Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:**

<b>Line No.</b> ▼	<b>Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).</b>
93A	HEALTH PLAN SERVICE CHARGES
93B	EDUCATIONAL AND WORK RELATED
94	MEMBERSHIP SERVICES
103A	REIMBURSEMENTS and MISC REVENUE
103B	REIMBURSEMENTS FOR LABOR BONDS

**TY 2007 Depreciation and Depletion Schedule****Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO**EIN:** 52-0913725

<b>Asset</b>	<b>Amount</b>
BUILDING	38,821
AUTOS	33,144
EQUIPMENT	463,119
LEASEHOLD IMPROVEMENTS	48,213

**TY 2007 Gain/Loss from Sale of Public Securities Schedule****Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO**EIN:** 52-0913725**Gross Sales Price:** 10,946,789**Basis:** 10,891,431**Sales Expenses:** 0**Total (net):** 55,358



**TY 2007 Land etc. Schedule**

**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO

**EIN:** 52-0913725

<b>Category/Item</b>	<b>Cost/Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>
LAND	619,171		619,171
BUILDING	3,231,037	1,607,563	1,623,474
AUTOS	217,479	78,896	138,583
EQUIPMENT	6,297,798	4,291,001	2,006,797
LEASEHOLD IMPROVEMENTS	4,202,507	3,019,451	1,183,056
LAND	3,000		3,000

**TY 2007 Other Assets Schedule**

**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO

**EIN:** 52-0913725

Description	Beginning of Year Amount	End of Year Amount
Deposits	72,138	80,374
other	618	0

## TY 2007 Other Changes in Net Assets Schedule

**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO

**EIN:** 52-0913725

Description	Amount
UNREALIZED GAIN OF INVESTMENTS	63,654
TRANSFER OF ASSETS TO TEXAS LLC	-778,368

**TY 2007 Other Expenses Included Schedule**

**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO

**EIN:** 52-0913725

Description	Amount
EXPENSE OF CONSOLIDATED ENTITIES	3,319,520
RENT EXPENSE LINE 6B	126,950

**TY 2007 Other Expenses  
Not Included Schedule**

**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO

**EIN:** 52-0913725

Description	Amount
INTERCOMPANY ELIMINATIONS	1,724,574

**TY 2007 Other Liabilities Schedule**

**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO

**EIN:** 52-0913725

Description	Beginning of Year Amount	End of Year Amount
CASH OVERDRAFT	251,930	663,358

**TY 2007 Other Revenues Included Schedule**

**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO

**EIN:** 52-0913725

Description	Amount
INCOME OF CONSOLIDATED ENTITIES	4,263,522

**TY 2007 Other Revenues  
Not Included Schedule****Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO**EIN:** 52-0913725

<b>Description</b>	<b>Amount</b>
RENT EXPENSE LINE 6B	-126,950
INTERCOMPANY ELIMINATIONS	1,724,574



## TY 2007 Payments to Affiliates Schedule

**Name:** AMERICAN POSTAL WORKERS UNION AFL-CIO

**EIN:** 52-0913725

Name	Address	Amount	Purpose
AFL-CIO	815 16TH STREET NW WASHINGTON, DC 20006	2,333,020	PER CAPITA TAXES

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2007, or tax year beginning \_\_\_\_\_, 2007, and ending \_\_\_\_\_, 20\_\_

2007

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

See instructions.

Department of the Treasury Internal Revenue Service

Name of exempt organization AMERICAN POSTAL WORKERS UNION AFL-CIO

Employer identification number 52-0913725

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Table with 5 rows (1a-5a) and 2 columns (b Total revenue, b Total tax, b Tax based on investment income, b Balance due). Includes handwritten values for 1a and 1b.

Part II Declaration of Officer

6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2007 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here: Terry D. Stapleton (Signature), 8/7/08 (Date), SEC/TREAS (Title)

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernization e-file (MeF) Information for Authorized IRS e-file Providers. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only: Glenn Woodson (Signature), 8/5/08 (Date), CALIBRE CPA GROUP PLLC (Firm name), 1850 K STREET, N.W. (Address), WASHINGTON, DC 20006 (City/State/Zip), EIN 47-0900880 (EIN), (202) 331-9880 (Phone no)

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only: (Signature), (Date), (Check if self-employed), (Preparer's SSN or PTIN), (Firm's name), (Address), (City/State/Zip), (EIN), (Phone no)