

FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN \$250,000 IN TOTAL ANNUAL RECEIPTS

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT			
For Official Use Only	<table border="1"> <tr> <td style="width: 50%;">1. FILE NUMBER 501-998</td> <td style="width: 50%;">2. PERIOD COVERED MON DAY YEAR From 01/01/2007 Through 12/31/2007</td> </tr> </table>	1. FILE NUMBER 501-998	2. PERIOD COVERED MON DAY YEAR From 01/01/2007 Through 12/31/2007
1. FILE NUMBER 501-998	2. PERIOD COVERED MON DAY YEAR From 01/01/2007 Through 12/31/2007		
<p>E</p>			

4. AFFILIATION OR ORGANIZATION NAME GOVERNMENT EMPLOYEES AFGE AFL-CIO	
5. DESIGNATION (Local, Lodge, etc.) LOCAL UNION	6. DESIGNATION NUMBER 2040
7. UNIT NAME (if any) DOD	
9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 56.) Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

8. MAILING ADDRESS (Type or print in capital letters)	
First Name AFGE	Last Name LOCAL 2040
P.O. Box – Building and Room Number (if any) Number and Street PO BOX 200157	
City DENVER	ZIP Code + 4 80220-0157
State CO	

56. ADDITIONAL INFORMATION

Each of the undersigned, duly authorized officers of the above labor organization, declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)

57. SIGNED: _____ PRESIDENT (If other title, see instructions.)
 58. SIGNED: _____ TREASURER (If other title, see instructions.)

Date _____ Telephone Number _____
 Date _____ Telephone Number _____

COMPLETE ITEMS 10 THROUGH 23

FILE NUMBER:

501-998

10. During the reporting period did the labor organization have a 'subsidiary organization' as defined in section X of the instructions?
 Yes No
11. During the reporting period did the labor organization create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries?
 Yes No
12. During the reporting period did the labor organization have a political action committee (PAC) fund?
 Yes No
13. During the reporting period did the labor organization acquire or dispose of any assets in any manner other than by purchase or sale?
 Yes No
14. During the reporting period did the labor organization have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?
 Yes No
15. During the reporting period did the labor organization discover any loss or shortage of funds or other assets? (Answer "Yes" even if there has been repayment or recovery.)
 Yes No
16. During the reporting period did the labor organization have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan?
 Yes No
17. During the reporting period did the labor organization pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000?
 Yes No

18. During the reporting period did the labor organization have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a business enterprise?
 Yes No

19. How many members did your organization have at the end of the reporting period?
 221

20. What is the maximum amount recoverable under your organization's fidelity bond, for a loss caused by any officer or employee of your organization?
 \$17,000

21. During the reporting period did the labor organization have any changes in its constitution and bylaws, other than the rates of dues and fees, or in practices/procedures listed in the instructions? (If the constitution and bylaws or practices/procedures have changed, see the instructions.)
 Yes No

22. What is the date of your organization's next regular election of officers?
 Oct 2010

23. What are your organization's rates of dues and fees? (Enter a minimum and maximum if more than one rate applies for any line.)

Rates of Dues and Fees				
Dues/Fees	Amount	Unit	Minimum	Maximum
(b) Initiation Fees		per		
(c) Transfer Fees		per		
(d) Work Permits		per		

If the answer to any of the above questions is "Yes", provide details in Item 56 (Additional Information) as explained in the instructions for each Item.

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only – Do Not Enter Cents

FILE NUMBER: 501-998

(A) Name		(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)		(C) Status *	Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)	
(B) Title	(Enter title of officer, such as PRESIDENT or TREASURER.)	First Name	Middle Initial					
1.	MOLINA	MIKE						
	PRESIDENT			C	\$0	\$8,924	\$8,924	
2.	BOOKER	KELVIN						
	UNIT A VICE PRESIDENT			C	\$0	\$6,016	\$6,016	
3.	LUBANK	LORRAINE						
	UNIT B VICE PRESIDENT			C	\$0	\$200	\$200	
4.	TERRONES	FRANCISCO						
	SECRETART			P	\$0	\$2,189	\$2,189	
5.	NELSON	VICKI						
	SECRETARY			N	\$0	\$10	\$10	
6.	WELLS	MARIAN						
	TRUSTEE			C	\$0	\$75	\$75	
7.	PAPPAS	DAVID						
	UNIT C VICE PRESIDENT			C	\$0	\$335	\$335	
8.	Totals from additional pages (if any)							
9.	Totals of Lines 1 through 8							
					10. Less Deductions			
					11. Net Disbursements			\$21,752

The Total from Line 11 will be entered in Item 45 (if any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.)

Enter Amounts in Dollars Only – Do Not Enter Cents

FILE NUMBER: 501-998

STATEMENT A ASSETS AND LIABILITIES		Start of Reporting Period (A)	End of Reporting Period (B)	Item	LIABILITIES	Start of Reporting Period (C)	End of Reporting Period (D)
Item	ASSETS						
25. Cash		\$61,285	\$52,075	32. Accounts Payable		\$0	\$0
26. Loans Receivable		\$0	\$0	33. Loans Payable		\$0	\$0
27. U.S. Treasury Securities		\$0	\$0	34. Mortgages Payable		\$0	\$0
28. Investments		\$0	\$0	35. Other Liabilities		\$0	\$0
29. Fixed Assets		\$0	\$0	36. TOTAL LIABILITIES		\$0	\$0
30. Other Assets		\$0	\$0				
31. TOTAL ASSETS		\$61,285	\$52,075	37. NET ASSETS (Item 31 less Item 36)		\$61,285	\$52,075

STATEMENT B RECEIPTS AND DISBURSEMENTS		AMOUNT	AMOUNT	Item	CASH DISBURSEMENTS	AMOUNT
Item	CASH RECEIPTS					
38. Dues		\$114,031		45. To Officers (from Item 24)		\$21,752
39. Per Capita Tax		\$0		46. To Employees (less deductions)		\$0
40. Fees, Fines, Assessments & Work Permits		\$0		47. Per Capita Tax		\$49,757
41. Interest & Dividends		\$951		48. Office & Administrative Expense		\$12,789
42. Sale of Investments & Fixed Assets		\$0		49. Professional Fees		\$11,115
43. Other Receipts		\$0		50. Benefits		\$28,509
44. TOTAL RECEIPTS		\$114,982		51. Contributions, Gifts & Grants		\$270
If total receipts reported in Item 44 are \$250,000 or more, your organization must file Form LM-2 instead of this form.				52. Purchase of Investments & Fixed Assets		\$0
				53. Loans Made		\$0
				54. Other Disbursements		\$0
				55. TOTAL DISBURSEMENTS		\$124,192

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only – Do Not Enter Cents

FILE NUMBER: 501-998

(A) Name		(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)		(C) Status *	Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)	
(B) Title	(Enter title of officer, such as PRESIDENT or TREASURER.)	First Name	Middle Initial					
1.	MANGARRES	DAVID		P	\$0	\$567	\$567	
	TRUSTEE							
2.	WILLIAMSON-BROWN	CHERYL		N	\$0	\$700	\$700	
	TRUSTEE							
3.	HAYES	FRANCINE		N	\$0	\$2,736	\$2,736	
	TREASURER							
4.							\$0	
5.							\$0	
6.							\$0	
7.							\$0	
8.								
9.	Totals of Lines 1 through 8					\$0	\$4,003	\$4,003

* Code for (C) Status: past officer – P; continuing officer – C; new officer during the reporting period – N. (If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.)

56. ADDITIONAL INFORMATION

FILE NUMBER: 501-998

Address of Record: 6760 E Irvington Place Denver, Colorado