

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/form990

OMB No 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 01-01-2017, and ending 12-31-2017

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

C Name of organization
SERVICE EMPLOYEES INTERNATIONAL UNION
% ARUN IVATURY CFO
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1800 MASSACHUSETTS AVENUE NW
City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20036

D Employer identification number
36-0852885
E Telephone number
(202) 730-7000
G Gross receipts \$ 313,456,657

F Name and address of principal officer
MARY KAY HENRY
1800 MASSACHUSETTS AVENUE NW
WASHINGTON, DC 20036

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶ 0647

I Tax-exempt status 501(c)(3) 501(c) (5) ◀ (insert no) 4947(a)(1) or 527
J Website: ▶ WWW SEIU ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1921 **M** State of legal domicile DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities
Bargain collectively with employers to secure better working conditions, wages, and benefits for workers
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) **3** 77
4 Number of independent voting members of the governing body (Part VI, line 1b) **4** 67
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) **5** 629
6 Total number of volunteers (estimate if necessary) **6** 0
7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a** 0
b Net unrelated business taxable income from Form 990-T, line 34 **7b**

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	0	0
9 Program service revenue (Part VIII, line 2g)	287,232,450	284,948,909
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,014,540	4,111,864
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	17,320,142	24,285,089
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	307,567,132	313,345,862
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
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)	80,713,531	74,520,446
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)	201,763,048	185,438,659
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	282,476,579	259,959,105
19 Revenue less expenses Subtract line 18 from line 12	25,090,553	53,386,757
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	217,098,892	274,674,133
21 Total liabilities (Part X, line 26)	17,878,561	20,462,761
22 Net assets or fund balances Subtract line 21 from line 20	199,220,331	254,211,372

Part II Signature Block

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

Sign Here

Signature of officer _____ Date 2018-11-28
GERALD HUDSON SECRETARY-TREASURER
Type or print name and title _____

Paid Preparer Use Only
Print/Type preparer's name RICHARD L RUVELSON Preparer's signature RICHARD L RUVELSON Date _____
Check if self-employed PTIN P00234075
Firm's name ▶ WITHUMSMITHBROWNPC Firm's EIN ▶ _____
Firm's address ▶ 4600 EAST WEST HWY 900 Phone no (301) 272-6000
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

SEIU IS A LARGE INTERNATIONAL LABOR ORGANIZATION IT IS FIRST AND FOREMOST AN ASSOCIATION OF WORKERS WHO HAVE JOINED TOGETHER TO PROTECT AND PROMOTE THE INTERESTS OF ITS MEMBERS AND ALL WORKERS BY BARGAINING COLLECTIVELY WITH THEIR EMPLOYERS TO SECURE BETTER WORKING CONDITIONS, WAGES AND SIMILAR BENEFITS SEIU BELIEVES IN AND WILL FIGHT FOR A JUST SOCIETY WHERE ALL WORKERS ARE VALUED AND PEOPLE RESPECTED, WHERE ALL FAMILIES AND COMMUNITIES THRIVE, AND WHERE WE LEAVE A BETTER AND MORE EQUAL WORLD FOR GENERATIONS TO COME SEIU FULL MISSION STATEMENT IS SET FORTH IN ITS CONSTITUTION AND BYLAWS

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 \$)
See Additional Data

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> 🗑️		No
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?	Yes	
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> 🗑️	Yes	
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> 🗑️		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <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

Part IV Checklist of Required Schedules (continued)

	Yes	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?		
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>		No
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>		No
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>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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>		
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>		
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>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
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>	Yes	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
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>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
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>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
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>		
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>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

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 number, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, charitable contributions, and other IRS filings.

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 (77), 1b (67), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17, 18, 19, 20.

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

Table with columns (A) Name and Title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation.

Summary rows: 1b Sub-Total, c Total from continuation sheets to Part VII, Section A, d Total (add lines 1b and 1c)

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 -> 249

Table with 3 rows and 3 columns. Rows 3, 4, 5 asking about former officers, compensation > \$150,000, and compensation from unrelated organizations.

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Lists contractors like SKD KNICKERBOCKER LLC, APPLIED AUTOMATED ENGINEERING CORP, etc.

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 -> 73

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 PER CAPITA TAXES	900099	282,456,525	282,456,525		
	b DUES FROM LOCALS	900099	1,242,314	1,242,314		
	c ADMINISTRATIVE REIMBURSEMENT	900099	1,250,070	1,250,070		
	d _____					
	e _____					
	f All other program service revenue					
g Total. Add lines 2a-2f		284,948,909				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,517,248		3,517,248	
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		495,779		495,779	
	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	705,411			
		(ii) Other				
		b Less cost or other basis and sales expenses	110,795			
		c Gain or (loss)	594,616			
	d Net gain or (loss)		594,616		594,616	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a	0			
		b Less direct expenses	0			
c Net income or (loss) from fundraising events			0			
9a Gross income from gaming activities See Part IV, line 19	a	0				
	b Less direct expenses	0				
	c Net income or (loss) from gaming activities		0			
10a Gross sales of inventory, less returns and allowances	a	0				
	b Less cost of goods sold	0				
	c Net income or (loss) from sales of inventory		0			
Miscellaneous Revenue	Business Code					
11a REIMBURSEMENTS FROM LOCALS AND OTHERS	900099	13,583,766	13,583,766			
b EXPENSE REIMBURSEMENTS	900099	8,796,144	8,796,144			
c SETTLEMENT INCOME	900099	1,409,400	1,409,400			
d All other revenue						
e Total. Add lines 11a-11d		23,789,310				
12 Total revenue. See Instructions		313,345,862	308,738,219		4,607,643	

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.	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	3,481,737			
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.	48,231,484			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	8,197,469			
9 Other employee benefits.	10,546,790			
10 Payroll taxes.	4,062,966			
11 Fees for services (non-employees)				
a Management.	0			
b Legal.	12,221,639			
c Accounting.	258,925			
d Lobbying.	0			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	80,458			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	13,988,943			
12 Advertising and promotion.	7,513,056			
13 Office expenses.	1,776,028			
14 Information technology.	5,831,703			
15 Royalties.	0			
16 Occupancy.	5,721,854			
17 Travel.	15,974,830			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	4,572,235			
20 Interest.	0			
21 Payments to affiliates.	6,324,052			
22 Depreciation, depletion, and amortization.	78,002			
23 Insurance.	1,000,359			
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 REIMBURSEMENTS/SUBSIDIES	49,490,020			
b REBATES TO AFFILIATES	42,926,087			
c CONTRIBUTIONS & SPECIAL PROJ	13,800,985			
d BAD DEBTS	1,760,777			
e All other expenses	2,118,706			
25 Total functional expenses. Add lines 1 through 24e.	259,959,105			
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 IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	9,554,807	1	4,907,030
	2 Savings and temporary cash investments	39,463,118	2	85,678,592
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	33,874,631	4	41,646,378
	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	13,506,864	7	13,615,189
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	2,034,268	9	703,992
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	9,566,058		
	b Less accumulated depreciation	8,866,063		
		257,101	10c	699,995
	11 Investments—publicly traded securities	105,724,895	11	110,889,411
	12 Investments—other securities See Part IV, line 11	8,247,982	12	11,859,867
	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	4,435,226	15	4,673,679	
16 Total assets. Add lines 1 through 15 (must equal line 34)	217,098,892	16	274,674,133	
Liabilities	17 Accounts payable and accrued expenses	17,878,561	17	20,462,761
	18 Grants payable	0	18	0
	19 Deferred revenue	0	19	0
	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	0	25	0
	26 Total liabilities. Add lines 17 through 25	17,878,561	26	20,462,761
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	199,220,331	27	254,211,372
	28 Temporarily restricted net assets	0	28	0
	29 Permanently restricted net assets	0	29	0
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. 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	199,220,331	33	254,211,372
	34 Total liabilities and net assets/fund balances	217,098,892	34	274,674,133

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	313,345,862
2	Total expenses (must equal Part IX, column (A), line 25)	2	259,959,105
3	Revenue less expenses Subtract line 2 from line 1	3	53,386,757
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	199,220,331
5	Net unrealized gains (losses) on investments	5	1,604,284
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	254,211,372

Part XII Financial Statements and Reporting

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

		Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____</p> <p>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>			
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</p> <p>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</p> <p><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>b Were the organization's financial statements audited by an independent accountant?</p> <p>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</p> <p><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>c 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?</p> <p>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O</p>	2c	Yes	
<p>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?</p>	3a		No
<p>b 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</p>	3b		

Additional Data

Software ID:

Software Version:

EIN: 36-0852885

Name: SERVICE EMPLOYEES INTERNATIONAL UNION

Form 990 (2017)

Form 990, Part III, Line 4a:

Supporting organizing and bargaining efforts for affiliates and members and political action and education

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			
Mary Kay Henry International President	35 0	X		X				264,212	0	118,939
Gerald Hudson Int'l Sec-Treasurer	35 0	X		X				226,494	0	114,770
Valerie Long Executive Vice President	30 0	X		X				210,974	0	104,051
Leslie Frane Executive Vice President	35 0	X		X				198,216	0	61,607
Neal Bisno Executive Vice President	35 0	X		X				198,216	0	30,398
Luisa Blue Executive Vice President	35 0	X		X				198,216	0	182,354
Heather Conroy Executive Vice President	35 0	X		X				198,216	0	42,443
Rocio Saenz Executive Vice President	35 0	X		X				198,216	0	75,691
Scott Courtney Executive VP (Thru 10/2017)	35 0	X		X				272,321	0	72,128
Thomas Balanoff Vice President	10 0	X						0	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			
Laphonza Butler Vice President	1 0 0 0	X						0	0	0
Maria Castaneda Vice President	1 0 0 0	X						0	0	0
Hector Figueroa Vice President	1 0 0 0	X						0	0	0
Lynne Fox Vice President	1 0 0 0	X						0	0	0
George Gresham Vice President	1 0 0 0	X						0	0	0
Karen Hart Vice President	1 0 0 0	X						0	0	0
David Holway Vice President	1 0 0 0	X						0	0	12,406
David Huerta Vice President	1 0 0 0	X						0	0	0
Keith Kelleher Vice President (Thru 12/2017)	1 0 0 0	X						0	0	24,810
Danielle Legault Vice President (Thru 12/2017)	1 0 0 0	X						0	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			
Carol Nieters Vice President	1 0 0 0	X						0	0	0
Roberto Pagan Rodriguez Vice President	1 0 0 0	X						0	0	0
Dian Palmer Vice President	1 0 0 0	X						0	0	0
David Pickus Vice President	1 0 0 0	X						0	0	0
David Regan Vice President	1 0 0 0	X						0	0	0
David Rolf Vice President	1 0 0 0	X						0	0	0
Edgar Romney Vice President	1 0 0 0	X						0	0	0
Monica Russo Vice President	1 0 0 0	X						0	0	0
Roxanne Sanchez Vice President	1 0 0 0	X						0	0	0
Bob Schoonover Vice President	1 0 0 0	X						0	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			
Diane Sosne Vice President	1 0 0 0	X						0	0	0
Sharleen Stewart Vice President	1 0 0 0	X						0	0	0
Yvonne Walker Vice President	1 0 0 0	X						0	0	0
Becky Williams Vice President	1 0 0 0	X						0	0	0
Max Arias Executive Board Member	1 0 0 0	X						0	0	0
Martha Baker Executive Board Member	1 0 0 0	X						0	0	0
Christine Boardman Executive Board Member	1 0 0 0	X						0	0	12,406
Kyle Bragg Executive Board Member	1 0 0 0	X						0	0	0
David Bridger Executive Board Member	1 0 0 0	X						0	0	0
David Broder Executive Board Member	1 0 0 0	X						0	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			
Lisa Brown Executive Board Member	1 0 0 0	X						0	0	0
Elsa Caballero Executive Board Member	1 0 0 0	X						0	0	0
Barbara Cape Executive Board Member	1 0 0 0	X						0	0	0
Merle Cuttitta Executive Board Member	1 0 0 0	X						0	0	0
Charlotte Shindler Executive Board Member	1 0 0 0	X						0	0	0
Jennifer Eagan Executive Board Member	1 0 0 0	X						0	0	0
Larry Engelstein Executive Board Member	1 0 0 0	X						0	0	0
David Garcias Executive Board Member	1 0 0 0	X						0	0	0
Cathy Glasson Executive Board Member	1 0 0 0	X						0	0	24,810
Rich Gulla Executive Board Member	1 0 0 0	X						0	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			
Jamie Gulley Executive Board Member	1 0 0 0	X						0	0	0
Ross Hailey Exec Board Mbr (thru 01/2017)	1 0 0 0	X						0	0	0
Stanley Drewery Executive Board Member	1 0 0 0	X						0	0	0
Tom Herman Exec Board Mbr (Thru 12/2017)	1 0 0 0	X						0	0	0
Greg Kelley Executive Board Member	1 0 0 0	X						0	0	0
Eileen Kirlin Executive Board Member	1 0 1 0	X						177,566	0	0
Raymond Larcher Executive Board Member	1 0 0 0	X						0	0	0
Mitch Leonard Executive Board Member	1 0 0 0	X						0	0	0
Alphonso Mayfield Executive Board Member	1 0 0 0	X						0	0	0
Javier Morillo-Alicea Executive Board Member	1 0 0 0	X						0	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			
Brian Rudiger Executive Board Member	1 0 0 0	X						0	0	0
Cam Nelson Exec Board Mbr (Thru 01/2017)	1 0 0 0	X						0	0	0
Meg Niemi Executive Board Member	1 0 0 0	X						0	0	0
Scott Phillipson Executive Board Member	1 0 0 0	X						0	0	0
Andy Potter Executive Board Member	1 0 0 0	X						0	0	0
Brad Rayson Executive Board Member	1 0 0 0	X						0	0	0
Marge Robinson Exec Board Mbr (Thru 10/2017)	1 0 0 0	X						0	0	0
Tamekia Robinson Executive Board Member	1 0 0 0	X						0	0	0
Ron Ruggiero Executive Board Member	1 0 0 0	X						0	0	0
Sergio Salinas Executive Board Member	1 0 0 0	X						0	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			
Wayne Spence Executive Board Member	1 0 0 0	X						0	0	0
Peter MacKinnon Executive Board Member	1 0 0 0	X						0	0	0
Susan Tousignant Exec Board Mbr (Thru 01/2017)	1 0 0 0	X						0	0	0
Veronica Turner Executive Board Member	1 0 0 0	X						0	0	0
April Verrett Executive Board Member	1 0 0 0	X						0	0	0
Ramona Welton Executive Board Member	1 0 0 0	X						0	0	0
Matt Yarnell Executive Board Member	1 0 0 0	X						0	0	0
Faith Culbreath Board of Auditors	1 0 0 0	X						0	0	0
Liza Estlund-Olson Board of Auditors	1 0 0 0	X						0	0	0
Laura Garza Board of Auditors	1 0 0 0	X						0	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			
Vince Peshia Board of Auditors	1 0 0 0	X						0	0	0
Sue Weinstein Board of Auditors	1 0 0 0	X						0	0	0
Milly Silva Board of Auditors	1 0 0 0	X						0	0	0
Pat Gantt Board of Auditors	1 0 0 0	X						0	0	0
Myra Glassman Board of Auditors	1 0 0 0	X						0	0	0
Peter Colavito Chief of Staff	35 0 0 0				X			192,523	0	46,691
Deirdre Fitzpatrick Deputy Chief of Staff	35 0 0 0				X			185,733	0	55,299
William Dempsey Chief Financial Officer	35 0 1 0				X			169,673	0	46,907
Luella Lewis Chair of SEIU Healthcare	35 0 0 0					X		170,850	0	31,150
Bruce Colburn Campaign Director 2	35 0 0 0					X		169,775	0	47,475

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			
Michelle Healy Public Division Director	35 0 0 0					X		165,894	0	59,448
Barbara Rosenthal National Organizing Director	35 0 0 0					X		171,298	0	57,651
Steven Hill Retirement Security Director	35 0 0 0					X		163,791	0	45,372
Michael Fishman Former Int'l Sec-Treas	12 0 0 0						X	177,281	0	0
Inga Skippings Former Chief of Staff	32 0 0 0						X	261,796	0	0

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2017
Open to Public Inspection

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

Name of the organization SERVICE EMPLOYEES INTERNATIONAL UNION	Employer identification number 36-0852885
---	--

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 (see instructions for definition of "political campaign activities")	▶
2 Political campaign activity expenditures (see instructions)	▶ \$ 15,043,960
3 Volunteer hours for political campaign activities (see instructions)	▶

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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) SEIU POLITICAL EDUCATION & ACTION	1800 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	52-2263644		6,417,988
2				
3				
4				
5				
6				

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) 2014	(b) 2015	(c) 2016	(d) 2017	(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					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1 Yes	No
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2 Yes	No
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3 Yes	No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (see instructions)	5

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
PART I-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	Member to member communications in support of, or in opposition to, candidates for federal, state and local office Payments for administrative and fundraising expenses for SEIU cope, the union's federally registered political action committee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► 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.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
SERVICE EMPLOYEES INTERNATIONAL UNION

Employer identification number
36-0852885

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

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 | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 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" on 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 | | Yes | No |
| (ii) related organizations | | | |
- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
- 3b**

	Yes	No
3a(i)		
3a(ii)		
3b		
- 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" on 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		829,220	747,369	81,851
d Equipment		8,245,594	7,627,449	618,144
e Other		491,244	491,244	0
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				699,995

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶	

Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	▶	

Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	▶

Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 0

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

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	313,326,683
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	1,604,284	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	41,302,624	
e	Add lines 2a through 2d		2e	42,906,908
3	Subtract line 2e from line 1		3	270,419,775
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	42,926,087	
c	Add lines 4a and 4b		4c	42,926,087
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	313,345,862

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	252,162,021
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	38,855,463	
e	Add lines 2a through 2d		2e	38,855,463
3	Subtract line 2e from line 1		3	213,306,558
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	46,652,547	
c	Add lines 4a and 4b		4c	46,652,547
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	259,959,105

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
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 36-0852885

Name: SERVICE EMPLOYEES INTERNATIONAL UNION

Supplemental 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 organization 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, 2017 there are no uncertain positions taken or expected to be taken that would require recognition of a liability in the consolidated financial statements. The United States Division, 1800 Mass, COPE, United We Can and Black PAC are subject to routine audits by taxing jurisdictions, however, there are currently no audits in progress for any tax periods. Management believes that 1800 Mass is no longer subject to income tax examinations for years prior to 2014.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER REVENUES INCLUDED ON FINANCIALS, NOT FORM 990	\$ 41,302,624 REVENUES OF CONSOLIDATED ENTITIES

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER REVENUES INCLUDED ON FORM 990, NOT FINANCIALS	\$ 42,926,087 REBATES TO AFFILIATES INCLUDED IN EXPENSES ON FORM 990

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER EXPENSES INCLUDED ON FINANCIALS, NOT FORM 990	\$ 38,855,463 EXPENSES OF CONSOLIDATED ENTITIES

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER EXPENSES INCLUDED ON FORM 990, NOT FINANCIALS	\$ 42,926,087 REBATES TO AFFILIATES \$ 3,726,460 OCCUPANCY EXPENSES REIMBURSED TO SUBSIDIARY ----- \$ 46,652,547

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ 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.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SERVICE EMPLOYEES INTERNATIONAL UNION

Employer identification number
36-0852885

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 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
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 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) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	6			4,553,716
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	6			4,553,716

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)									
(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 ▶ _____

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 separately 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* Yes No

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).

Return Reference	Explanation
PART I, LINE 3, COLUMN (E) - DESCRIPTION OF PROGRAM SERVICES	For all the regions listed in part I, the expenditures by SEIU were spent to support organizing activities and collective bargaining in the respective regions outside the United States

Additional Data

Software ID:

Software Version:

EIN: 36-0852885

Name: SERVICE EMPLOYEES INTERNATIONAL UNION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
Central America and the Caribbean	0		Program Services	SEE PART V	4,324
South Asia			Program Services	SEE PART V	8,793

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
North America			Program Services	SEE PART V	19,159
South America		2	Program Services	SEE PART V	90,814

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
East Asia and the Pacific			Program Services	SEE PART V	1,848,164
Europe (Including Iceland and Greenland)		4	Program Services	SEE PART V	2,582,153

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
Middle East and North Africa			Program Services	SEE PART V	309

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.**

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SERVICE EMPLOYEES INTERNATIONAL UNION

Employer identification number
36-0852885

Part I Questions Regarding Compensation

	Yes	No								
<p>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.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> First-class or charter travel</td> <td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<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 indemnification 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)		
<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 indemnification 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)									
<p>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.</p>	1b Yes									
<p>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?</p>	2 Yes									
<p>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.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a No	4b No								
	4c No									
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a	5b								
<p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a	6b								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7									
<p>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.</p>	8									
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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 - OTHER ITEMS PROVIDED TO OFFICERS AND KEY EMPLOYEES	In recognition of the heavy travel schedule required of full-time officers, Officers may elect to travel business (in a 3-class flight) or by first class (in a 2-class flight) at their discretion. However, in such situations, upgrade coupons should be used to cover the additional cost, whenever possible. Housing allowances are paid for officers and key employees upon review and prior approval in lieu of hotel stays when placed on a temporary assignment in a location other than their primary residence.
PART I, LINE 1B - WRITTEN POLICIES FOR REIMBURSED EXPENSES	There is a written policy relating to chartered flights and first class air travel. There is a written policy regarding the payment of housing allowances. The organization is in the process of formalizing written policies relating to other payments that are listed in line 1a.

Additional Data

Software ID:
Software Version:
EIN: 36-0852885
Name: SERVICE EMPLOYEES INTERNATIONAL UNION

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				
1Mary Kay Henry International President	(i)	255,641		8,571	91,744	27,195	383,151	0
	(ii)	0			0	0	0	0
1Gerald Hudson Int'l Sec-Treasurer	(i)	224,625		1,869	87,828	26,942	341,264	0
	(ii)	0			0	0	0	0
2Valerie Long Executive Vice President	(i)	200,040		10,934	77,297	26,754	315,025	0
	(ii)	0			0	0	0	0
3Leslie Frane Executive Vice President	(i)	198,216			45,535	16,072	259,823	0
	(ii)	0			0	0	0	0
4Neal Bisno Executive Vice President	(i)	198,216			14,325	16,073	228,614	0
	(ii)	0			0	0	0	0
5Luisa Blue Executive Vice President	(i)	198,216			155,337	27,017	380,570	0
	(ii)	0			0	0	0	0
6Heather Conroy Executive Vice President	(i)	198,216			15,708	26,735	240,659	0
	(ii)	0			0	0	0	0
7Rocio Saenz Executive Vice President	(i)	198,216			48,995	26,696	273,907	0
	(ii)	0			0	0	0	0
8Scott Courtney Executive VP (Thru 10/2017)	(i)	190,460		81,861	49,467	22,661	344,449	0
	(ii)	0			0	0	0	0
9Eileen Kirlin Executive Board Member	(i)	177,566			0	0	177,566	0
	(ii)	0			0	0	0	0
10Peter Colavito Chief of Staff	(i)	189,061	3,462		20,001	26,690	239,214	0
	(ii)	0			0	0	0	0
11Deirdre Fitzpatrick Deputy Chief of Staff	(i)	182,271	3,462		28,704	26,595	241,032	0
	(ii)	0			0	0	0	0
12William Dempsey Chief Financial Officer	(i)	166,711	2,962		31,096	15,811	216,580	0
	(ii)	0			0	0	0	0
13Luella Lewis Chair of SEIU Healthcare	(i)	167,888	2,962		15,292	15,858	202,000	0
	(ii)	0			0	0	0	0
14Bruce Colburn Campaign Director 2	(i)	165,820	3,955		33,045	14,430	217,250	0
	(ii)	0			0	0	0	0
15Michelle Healy Public Division Director	(i)	161,432	4,462		33,045	26,403	225,342	0
	(ii)	0			0	0	0	0
16Barbara Rosenthal National Organizing Director	(i)	160,496	3,962	6,840	31,132	26,519	228,949	0
	(ii)	0			0	0	0	0
17Steven Hill Retirement Security Director	(i)	160,329	3,462		19,152	26,220	209,163	0
	(ii)	0			0	0	0	0
18Michael Fishman Former Int'l Sec-Treas	(i)	177,281			0	0	177,281	0
	(ii)	0			0	0	0	0
19Inga Skippings Former Chief of Staff	(i)	261,796			0	0	261,796	0
	(ii)	0			0	0	0	0

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
 ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization SERVICE EMPLOYEES INTERNATIONAL UNION	Employer identification number 36-0852885
---	--

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
 Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
 Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$ _____

Part III Grants or Assistance Benefiting Interested Persons.
 Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ATLAS PROJECT	SEE BELOW	490,000	CONSULTING		No
(2) MICHAEL FISHMAN	FORMER OFFICER OF THE ORGANIZATION	177,281	CONSULTING		No
(3) INGA SKIPPINGS	FORMER KEY EMPLOYEE OF THE ORGANIZATION	261,796	CONSULTING		No

Part V Supplemental Information

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

Return Reference	Explanation
PART IV, LINE 1, COLUMN (B) - INTERESTED PERSON RELATIONSHIP	Eileen Kirlin, an Executive Board Member and consultant, is the spouse of Steve Rosenthal, who is 50% owner of the Atlas Project, a vendor that provides consulting services to SEIU

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SERVICE EMPLOYEES INTERNATIONAL UNION

Employer identification number

36-0852885

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION A, LINE 5 - SIGNIFICANT DIVERSION OF ASSETS	During the fall of 2017, SEIU discovered, through an internal investigation, that an employee fraudulently charged to the Union expenses that did not have a legitimate union purpose. Upon this initial discovery, the employee's relationship with SEIU was immediately terminated and the employee's final paycheck and leave balances were lawfully seized. A subsequent investigation revealed that the fraud took place over the prior 2 years and included approximately \$436,000 in fraudulent expenses. The Union submitted for full reimbursement to the Union's bonding insurance and has been made whole for this loss.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION A, LINE 6 - MEMBERS	SEIU members are working men and women who are employed or engaged in any phase of private, nonprofit or public employment, over which SEIU claims or exercises jurisdiction. Members have the right to run for local union office, including governing boards, and to elect officers and members of the governing boards of their local unions. Members also have the right to elect delegates from their local unions to represent them at SEIU's highest governing body, the international convention, and at conventions of SEIU intermediate bodies such as state councils.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION A, LINE 7A - MEMBERS POWER TO ELECT OR APPOINT	Under the SEIU Constitution & Bylaws, all union members in good standing have the right to run for elected office of their local union, as well as have the power to elect officers and members of their local unions' governing boards. Members also have the right to elect delegates from among their membership to represent them at SEIU's highest governing body, the international convention (as well as at the conventions of SEIU intermediate bodies, such as state councils). At the international convention, members, through their elected delegates, elect the officers and international executive board members of their international union.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION A, LINE 7B - GOVERNANCE DECISIONS RESERVED TO MEMBERS	Members actively participate in all aspects of the governance of the union. Members, through their elected delegates at the international convention, elect from among their members the officers and international executive board members of the international union. The international executive board is the highest decision-making body in SEIU between conventions, which take place every four years.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINE 11B - REVIEW PROCESS OF FORM 990	A copy of the form 990 was provided to all members of the SEIU international executive board for their review and comment before it was filed. The international executive board is a governing body of the SEIU with authority to act on behalf of the union. It presently consists of 77 officers who are responsible for overseeing the affairs and financial operations of the union. In addition to review by this governing body, the form 990 is carefully scrutinized by the SEIU's finance department and its outside auditors. Also, it is prepared in consultation with outside tax counsel to help ensure the union's compliance with all tax reporting requirements.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINE 12C - CONFLICT OF INTEREST POLICY COMPLIANCE	All officers and managers are required to complete an annual mandatory ethics survey with questions requiring disclosure of potential conflicts of interest. The code is sent to all covered employees and they must certify that they are in compliance with it and understand it.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINE 15 - DETERMINATION OF OFFICER COMPENSATION	Pursuant to Article XI, Section 6(c) of the SEIU Constitution and Bylaws, the International Executive Board (the IEB) sets and approves the compensation of the International President and Secretary-Treasurer Under Article VIII, Section 1(g) of the SEIU Constitution and Bylaws, the International President has the authority to fix the compensation for Executive Vice Presidents In 2000, the IEB decided that future annual increases would be the same as that approved for SEIU managers The annual increase for SEIU managers is included in the annual budget presented by the International Secretary-Treasurer to the IEB for its approval in January of each calendar year In 2016, there were no salary increases for the full-time officers and there was a 2% salary increase for managers, which was substantiated and documented contemporaneously In 2017, there were a 2% salary increase for the full-time officers and managers, which was substantiated and documented contemporaneously

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION C, LINE 19 - AVAILABILITY OF GOVERNING DOCUMENTS AND F/S	The organization makes its governing document, constitution and by-laws available to the public through SEIU's website and by requesting it from the Department of Labor. The conflict of interest policy and financial statements are not made available to the public.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2017

**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
SERVICE EMPLOYEES INTERNATIONAL UNION

Employer identification number

36-0852885

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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.

See Additional Data Table

(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

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

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

	Yes	No
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		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		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) 1800 MASSACHUSETTS AVENUE CORP	B	8,403,754	CAPITAL CONTRIB
(2) 1800 MASSACHUSETTS AVENUE CORP	O	64,314	ALLOCATED COSTS
(3) SEIU EDUCATION AND SUPPORT FUND	O	157,542	ALLOCATED COSTS
(4) SEIU COMMITTEE ON POLITICAL EDUCATION	Q	8,787,394	CASH

Part VII **Supplemental Information**

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

Additional Data

Software ID:
Software Version:
EIN: 36-0852885
Name: SERVICE EMPLOYEES INTERNATIONAL UNION

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
1800 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 20-0451177	RE TITLE HLDG	DC	501(C)(2)		SEIU	Yes	
1802 EAST THOMAS ROAD PHOENIX, AZ 85106 20-1487940	POLITICAL ORG	AZ	527		SEIU	Yes	
1800 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 20-0859683	POLITICAL ORG	DC	527		SEIU	Yes	
1800 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 52-1761037	EDUCATION	DC	501(C)(3)		SEIU	Yes	
1800 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 20-2573109	POLITICAL ORG	DC	527		SEIU	Yes	
1800 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 52-2263644	POLITICAL ORG	DC	527		SEIU	Yes	
1800 MASSACHUSETTS AVE NW WASHINGTON, DC 20036 47-5491558	POLITICAL ORG	DC	527		SEIU	Yes	
1800 MASSACHUSETTS AVE NW WASHINGTON, DC 20036 81-1460820	POLITICAL ORG	DC	527		SEIU	Yes	