

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
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019

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

C Name of organization
AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite
815 16TH STREET NW
City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20006

D Employer identification number
53-0228172
E Telephone number
(202) 637-5199

F Name and address of principal officer
ELIZABETH H SHULER
815 16TH STREET NW
WASHINGTON, DC 20006

H(a) Is this a group return for subordinates?
H(b) Are all subordinates included?
H(c) Group exemption number

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

J Website: WWW AFLCIO ORG
K Form of organization
Corporation
Trust
Association
Other
UNINCORPORATED ASSOCIATION

L Year of formation 1955
M State of legal domicile DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities
FEDERATION OF LABOR UNIONS

Table with 2 columns: Description, Amount. Rows include: 2 Check this box, 3 Number of voting members (97), 4 Number of independent voting members (88), 5 Total number of individuals employed (427), 6 Total number of volunteers (0), 7a Total unrelated business revenue (-139,793), 7b Net unrelated business taxable income (-870,725).

Table with 4 columns: Description, Prior Year, Current Year, End of Year. Rows include: 8 Contributions and grants, 9 Program service revenue, 10 Investment income, 11 Other revenue, 12 Total revenue, 13 Grants and similar amounts paid, 14 Benefits paid, 15 Salaries, 16a Professional fundraising fees, 17 Other expenses, 18 Total expenses, 19 Revenue less expenses, 20 Total assets, 21 Total liabilities, 22 Net assets or fund balances.

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: 2020-07-15
ELIZABETH H SHULER SECRETARY-TREASURER
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name
Preparer's signature
Date
Check if self-employed
PTIN P01081188
Firm's name CALIBRE CPA GROUP PLLC
Firm's EIN 47-0900880
Firm's address 7501 WISCONSIN AVENUE SUITE 1200 WEST BETHESDA, MD 20814
Phone no (202) 331-9880

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission

THE ORGANIZATION IS A FEDERATION OF LABOR UNIONS ITS MISSION IS TO IMPROVE THE LIVES OF WORKING FAMILIES - TO BRING ECONOMIC JUSTICE TO THE WORKPLACE AND SOCIAL JUSTICE TO OUR NATION

**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

Table with 3 columns: Question ID, Question Text, and Answer (Yes/No). Rows include questions 1 through 22 regarding organizational requirements, such as political campaign activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 23-38 covering various organizational requirements and schedules J through O.

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 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

<p><b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .</p>	<b>2a</b>	427			
<p><b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			<b>2b</b>	Yes	
<p><b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .</p>			<b>3a</b>	Yes	
<p><b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . . .</p>			<b>3b</b>	Yes	
<p><b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .</p>			<b>4a</b>		No
<p><b>b</b> If "Yes," enter the name of the foreign country <span style="border-bottom: 1px solid black; display: inline-block; width: 150px;"></span> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</p>					
<p><b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .</p>			<b>5a</b>		No
<p><b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			<b>5b</b>		No
<p><b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .</p>			<b>5c</b>		
<p><b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .</p>			<b>6a</b>	Yes	
<p><b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .</p>			<b>6b</b>	Yes	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>					
<p><b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .</p>			<b>7a</b>		
<p><b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .</p>			<b>7b</b>		
<p><b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .</p>			<b>7c</b>		
<p><b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .</p>	<b>7d</b>				
<p><b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			<b>7e</b>		
<p><b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .</p>			<b>7f</b>		
<p><b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .</p>			<b>7g</b>		
<p><b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .</p>			<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b>					
<p>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .</p>			<b>8</b>		
<p><b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . . .</p>			<b>9a</b>		
<p><b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .</p>			<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter					
<p><b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .</p>	<b>10a</b>				
<p><b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	<b>10b</b>				
<b>11 Section 501(c)(12) organizations.</b> Enter					
<p><b>a</b> Gross income from members or shareholders . . . . .</p>	<b>11a</b>				
<p><b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .</p>	<b>11b</b>				
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?					
<p><b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	<b>12b</b>				
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
<p><b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O</p>			<b>13a</b>		
<p><b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .</p>	<b>13b</b>				
<p><b>c</b> Enter the amount of reserves on hand . . . . .</p>	<b>13c</b>				
<p><b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .</p>			<b>14a</b>		No
<p><b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .</p>			<b>14b</b>		
<p><b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .</p>			<b>15</b>		No
<p><b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .</p>			<b>16</b>		No

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (97); 1b Enter the number of voting members included in line 1a, above, who are independent (88); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (Yes); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (No); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

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

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

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: Own website, Another's website, Upon request, Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ELIZABETH H SHULER SECRETARY-TREA 815 16TH STREET NW WASHINGTON, DC 20006 (202) 637-5250

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										





Part VIII Statement of Revenue

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

Table with 5 main columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1f (Contributions, Gifts, Grants) and 1g (Noncash contributions).

Table for Program Service Revenue with columns for Business Code, Total revenue, and sub-categories (B, C, D). Rows include 2a-2f (MEMBERSHIP DUES, AFFILIATED EXEMPT ORG, etc.) and 9 Total.

Table for Other Revenue with columns for Total revenue, (B), (C), and (D). Rows include 3-12 (Investment income, Royalties, Rental income, Securities, Fundraising events, Gaming activities, Sales of inventory, MISC RECEIPTS & REIMB, Total revenue).

**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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	23,725,386			
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	15,000			
<b>4</b> Benefits paid to or for members.				
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	1,325,160			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
<b>7</b> Other salaries and wages.	26,397,593			
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	6,434,625			
<b>9</b> Other employee benefits.	12,231,422			
<b>10</b> Payroll taxes.	2,112,292			
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management.				
<b>b</b> Legal.	161,153			
<b>c</b> Accounting.	131,250			
<b>d</b> Lobbying.				
<b>e</b> Professional fundraising services. See Part IV, line 17.				
<b>f</b> Investment management fees.	75,280			
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,978,206			
<b>12</b> Advertising and promotion.				
<b>13</b> Office expenses.	4,166,309			
<b>14</b> Information technology.	2,589,750			
<b>15</b> Royalties.				
<b>16</b> Occupancy.	3,116,710			
<b>17</b> Travel.	2,874,455			
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.				
<b>19</b> Conferences, conventions, and meetings.	1,587,244			
<b>20</b> Interest.	1,838,908			
<b>21</b> Payments to affiliates.				
<b>22</b> Depreciation, depletion, and amortization.	459,073			
<b>23</b> Insurance.	304,593			
<b>24</b> 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.)				
<b>a</b> ROYALTIES-PARTICIPATING	14,575,375			
<b>b</b> PRINTING/PUBLICATIONS	7,501,190			
<b>c</b> STATE UNITY FUND	2,075,117			
<b>d</b> RWJF GRANT EXPENSES	527,516			
<b>e</b> All other expenses	202,614			
<b>25</b> Total functional expenses. Add lines 1 through 24e.	116,406,221			
<b>26</b> 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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	4,250	<b>1</b>	4,250
	<b>2</b> Savings and temporary cash investments . . . . .	17,879,666	<b>2</b>	14,400,776
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	18,492,792	<b>4</b>	15,391,330
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> 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 . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .	1,604,503	<b>7</b>	1,427,110
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	374,448	<b>9</b>	380,283
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	67,458,814		
	<b>b</b> Less accumulated depreciation	46,012,462		
	<b>11</b> Investments—publicly traded securities . . . . .	19,951,228	<b>11</b>	30,085,987
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .	15,473,073	<b>12</b>	23,316,604
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets See Part IV, line 11 . . . . .		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	96,362,294	<b>16</b>	106,452,692	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	20,735,968	<b>17</b>	20,046,240
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	134,200	<b>19</b>	133,966
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> 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 . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	41,280,106	<b>23</b>	40,339,118
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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 . . . . .		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	62,150,274	<b>26</b>	60,519,324
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	32,438,339	<b>27</b>	45,044,859
	<b>28</b> Temporarily restricted net assets . . . . .	1,773,681	<b>28</b>	888,509
	<b>29</b> Permanently restricted net assets		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	34,212,020	<b>33</b>	45,933,368	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	96,362,294	<b>34</b>	106,452,692	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	126,268,984
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	116,406,221
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	9,862,763
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	34,212,020
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	2,668,477
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	75,280
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-885,172
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	45,933,368

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 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?  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 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?
- 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

	Yes	No
<b>2a</b>		No
<b>2b</b>	Yes	
<b>2c</b>	Yes	
<b>3a</b>		No
<b>3b</b>		

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 53-0228172

**Name:** AMERICAN FEDERATION OF LABOR AND  
CONGRESS OF INDUSTRIAL ORGANIZATIONS

Form 990 (2018)

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**Form 990, Part III, Line 4a:**

THE AFL-CIO IS A FEDERATION OF AFFILIATED NATIONAL AND INTERNATIONAL LABOR UNIONS, TRADE AND INDUSTRIAL DEPARTMENTS, STATE AND LOCAL CENTRAL BODIES AND DIRECTLY AFFILIATED LOCAL UNIONS. THE AFL-CIO ENGAGED IN A WIDE RANGE OF ACTIVITIES ON BEHALF OF ITS AFFILIATES AND THEIR MEMBERS. THESE ACTIVITIES ARE DESIGNED TO IMPROVE THE LIVES OF WORKING FAMILIES - TO BRING ECONOMIC JUSTICE TO THE WORKPLACE AND SOCIAL JUSTICE TO OUR NATION. THE AFL-CIO WORKED TO BUILD A BROAD MOVEMENT OF AMERICAN WORKERS BY ORGANIZING WORKERS INTO UNIONS, AND PROVIDED A VOICE FOR WORKERS' INTERESTS ON THE JOB, IN THEIR COMMUNITIES, AT ALL LEVELS OF GOVERNMENT, AND IN THE CHANGING GLOBAL ECONOMY.

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**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	Insttutchnal Trustee	Officer	Key employee	Highest compensated employee	Former			
APPELBAUM STUART ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
BOLAND JAMES ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
CALLAHAN JAMES ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
CANOLL TIMOTHY ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
CARTERIS GABRIELLE ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
CASTILLO BONNIE ..... VICE PRESIDENT	3 00 .....	X		X				0	300	0
COX J DAVID ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
DAGGET HAROLD ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
DEAN ERIC ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
DEPETE JOE ..... VICE PRESIDENT	3 00 .....	X		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	Insttutchnal Trustee	Officer	Key employee	Highest compensated employee	Former			
DESAI BHAIRAVI ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
DIMONDSTEIN MARK ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
DURKEE DAVID ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
ESTRADA CINDY ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
FAIRLEY WARREN ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
GERARD LEO W ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
HANLEY LAWRENCE ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
JOHNSON LORRETTA ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
JONES NEWTON B ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
JUNEMANN GREGORY J ..... VICE PRESIDENT	3 00 .....	X		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			
LANGFORD D MICHAEL ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
LANIGAN RICHARD ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
LOEB MATTHEW ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
LOGAN ERNEST ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
MARTINEZ ROBERT ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
MCBRIDE ELISSA ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
MCCUBBIN GEORGE ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
MCDANIEL VONDA ..... VICE PRESIDENT	3 00 .....	X		X				0	300	0
MCGARVEY SEAN ..... VICE PRESIDENT	3 00 .....	X		X				0	457,467	102,829
MCMANUS MARK ..... VICE PRESIDENT	3 00 .....	X		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	Insttutchnal Trustee	Officer	Key employee	Highest compensated employee	Former			
MILLS GWEN ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
NELSON SARA ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
O'SULLIVAN TERRY ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
PELLETIER LORI ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
PERRONE MARC ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
REDMOND FRED ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
RIGMAIDEN KENNETH ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
RINALDI PAUL ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
RIVERS CLYDE ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
ROBERTS CECIL ..... VICE PRESIDENT	3 00 .....	X		X				0	200	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	Insttutchnal Trustee	Officer	Key employee	Highest compensated employee	Former			
ROLANDO FREDRIC V ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
SACCO MICHAEL ..... VICE PRESIDENT	3 00 .....	X		X				0	100	0
SAMUELSEN JOHN ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
SAUNDERS LEE ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
SCARDELLETTI ROBERT A ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
SCHAITBERGER HAROLD A ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
SELLERS JOSEPH ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
SHEARON PAUL ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
SHELTON CHRISTOPHER ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
SMITH BRUCE ..... VICE PRESIDENT	3 00 .....	X		X				0	300	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			
SMITH DEMAURICE ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
STEPHENSON LONNIE ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
TAYLOR DONALD ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
VELASQUEZ BALDEMAR ..... VICE PRESIDENT	3 00 .....	X		X				0	300	0
WEINGARTEN RANDI ..... VICE PRESIDENT	3 00 .....	X		X				0	0	0
WOWKANECH CHARLES ..... VICE PRESIDENT	3 00 .....	X		X				0	900	0
AINLEY MARSHALL ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
ALMEIDA PAUL ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
ANDERSON KELLY ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
BLOOMINGDALE RICK ..... GENERAL BOARD MEMBER	1 00 .....	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			
BOLES JERRY ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
BROWN CLAYOLA ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
BRYANT ELISE ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
CABRAL SAM ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
CHRISTENSEN FRANK ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
DAVIS JERAME ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
DORNING JENNIFER ..... GENERAL BOARD MEMBER	1 00 .....	X						0	135,761	32,583
EIDING PATRICK ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
EKBLAD AL ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
FIORLETTA CARLO ..... GENERAL BOARD MEMBER	1 00 .....	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			
HAIR RAY ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
HART JAMES ..... GENERAL BOARD MEMBER	1 00 .....	X						0	261,538	62,769
HOGROGIAN PAUL ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
HUGHES ALAN ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
KELLY GLENN ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
KLINE RICHARD ..... GENERAL BOARD MEMBER	1 00 .....	X						0	140,500	33,720
LITTLE JUDY ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
LOUIS MIKE ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
MCCANN FLEO ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
MCCOURT JAMES ..... GENERAL BOARD MEMBER	1 00 .....	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			
MELVIN TERRY ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
MERINO YANIRA ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
MORRISON MATTHEW ..... GENERAL BOARD MEMBER	1 00 .....	X						0	184,251	0
ODOM JAMES ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
PICKETT W DAN ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
PULASKI ART ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
ROACH ROBERT ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
ROBINSON KINSEY ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
SHINDLE KATE ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
SPANO MARK ..... GENERAL BOARD MEMBER	1 00 .....	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			
STEPANO DANIEL ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
VALDEPENA BEN ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
WILLIS LARRY ..... GENERAL BOARD MEMBER	1 00 .....	X						0	272,749	103,814
YEH ALVINA ..... GENERAL BOARD MEMBER	1 00 .....	X						0	0	0
TRUMKA RICHARD ..... PRESIDENT	40 00 .....	X		X				282,626	0	96,336
SHULER ELIZABETH ..... SECRETARY - TREASURER	40 00 .....	X		X				237,474	0	87,548
GEBRE TEFERE ..... EXECUTIVE VICE PRESIDENT	40 00 .....	X		X				237,598	0	95,536
LEMMON PAUL ..... CHIEF OF STAFF/EXEC ASST TO PRES	40 00 .....				X			188,510	0	75,960
BECKER CRAIG ..... GENERAL COUNSEL	40 00 .....					X		183,367	0	76,888
CORRIGAN KATIE ..... SPECIAL ASST\INNOVATION&FUTURE WORKERS	40 00 .....					X		169,923	0	74,762

**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				
NEFF CHRIS ..... ASSISTANT TO THE PRESIDENT	40 00 .....					X		174,216	0	80,389	
RHINEHART LYNN ..... GENERAL COUNSEL	40 00 .....					X		151,999	0	37,017	
SILVERS DAMON ..... SPECIAL COUNSEL TO PRESIDRNT	40 00 .....					X		174,922	0	80,872	



**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.  
▶Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
  
**2018**  
**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 AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS	Employer identification number 53-0228172
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**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) ▶ \$ 6,884,606

**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?  Yes  No

**4a** Was a correction made?  Yes  No

**b** If "Yes," describe in Part IV

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

**1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

**2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

**3** Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$

**4** Did the filing organization file **Form 1120-POL** for this year?  Yes  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) AFL-CIO COPE TREASURY FUND	815 16TH ST NW WASHINGTON, DC 20006	52-2257723		4,770,956
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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> 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
<b>1</b> 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			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities?			
<b>j</b> Total. Add lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> 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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b> Yes	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	No
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year?	<b>3</b>	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."**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
<b>a</b> Current year	<b>2a</b>
<b>b</b> Carryover from last year	<b>2b</b>
<b>c</b> Total	<b>2c</b>
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>
<b>4</b> 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?	<b>4</b>
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>

**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	THE ORGANIZATION PROVIDED INFORMATION TO ITS MEMBERS ABOUT ELECTORAL CAMPAIGNS AND ISSUES, ENCOURAGED ITS MEMBERS TO PARTICIPATE IN THE POLITICAL PROCESS, ADVOCATED FOR PARTICULAR CANDIDATES, AND COLLABORATED WITH OTHER ORGANIZATIONS AND ALLIED GROUPS ON ELECTORAL MATTERS, ALL IN ORDER TO SERVE THE BEST INTERESTS OF THE ORGANIZATION'S MEMBERS, THEIR FAMILIES AND ALL WORKING PEOPLE. THE ORGANIZATION ALSO SPONSORED BOTH FEDERAL AND NONFEDERAL SEPARATE SEGREGATED FUNDS THAT ARE VARIOUSLY REGISTERED WITH THE FEDERAL ELECTION COMMISSION AND THE INTERNAL REVENUE SERVICE.

**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.**  
**► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

**Name of the organization**  
AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS

**Employer identification number**  
53-0228172

**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
<b>1</b> Total number at end of year		
<b>2</b> Aggregate value of contributions to (during year)		
<b>3</b> Aggregate value of grants from (during year)		
<b>4</b> Aggregate value at end of year		
<b>5</b> 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	
<b>6</b> 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	
<b>a</b> Total number of conservation easements	<b>2a</b>	
<b>b</b> Total acreage restricted by conservation easements	<b>2b</b>	
<b>c</b> Number of conservation easements on a certified historic structure included in (a)	<b>2c</b>	
<b>d</b> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	<b>2d</b>	

**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 |
|---|--------|
| <b>1c</b> Beginning balance             |        |
| <b>1d</b> Additions during the year     |        |
| <b>1e</b> Distributions during the year |        |
| <b>1f</b> 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
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> 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
- |  |     |    |
|--|-----|----|
| <b>(i)</b> unrelated organizations . . . . .   | Yes | No |
| <b>(ii)</b> related organizations . . . . .  |     |    |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . |     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" 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
<b>1a</b> Land . . . . .		3,133,244		3,133,244
<b>b</b> Buildings . . . . .		46,155,155	29,376,537	16,778,618
<b>c</b> Leasehold improvements		849,083	134,902	714,181
<b>d</b> Equipment . . . . .		12,133,159	11,332,894	800,265
<b>e</b> Other . . . . .		5,188,173	5,168,129	20,044
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				21,446,352

**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) AFL-CIO HOUSING INVESTMENT TRUST	20,749,127	F
(B) UNION LABOR LIFE INS CO CL A STK	2,547,082	F
(C) UNION LABOR LIFE INS CO CAP STK	20,395	F
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 12 )	23,316,604	

**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)		
<b>Total.</b> (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)	
<b>Total.</b> (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	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25 )	

**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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .		<b>5</b>	

**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.

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

**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:** 53-0228172

**Name:** AMERICAN FEDERATION OF LABOR AND  
CONGRESS OF INDUSTRIAL ORGANIZATIONS

## Supplemental Information

Return Reference	Explanation
PART X, LINE 2	EFFECTIVE JULY 1, 2009, THE FEDERATION ADOPTED THE AUTHORITATIVE GUIDANCE RELATING TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES INCLUDED IN ASC TOPIC INCOME TAXES THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN THE FEDERATION PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED JUNE 30, 2019 AND 2018, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS AS OF JUNE 30, 2019, THE STATUTE OF LIMITATIONS FOR TAX YEARS 2015 THROUGH 2017 REMAINS OPEN WITH THE U S FEDERAL JURISDICTION AND THE VARIOUS STATES AND LOCAL JURISDICTIONS IN WHICH THE FEDERATION FILES RETURNS IT IS THE FEDERATION'S POLICY TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS, IF ANY, IN UNRELATED BUSINESS INCOME TAX EXPENSE

**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.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

Name of the organization  
AMERICAN FEDERATION OF LABOR AND  
CONGRESS OF INDUSTRIAL ORGANIZATIONS

**Employer identification number**  
53-0228172

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

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
<b>3a</b> Sub-total	0	0			0
<b>b</b> Total from continuation sheets to Part I					0
<b>c Totals</b> (add lines 3a and 3b)	0	0			0

**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)
		NORTH AMERICA	GENERAL CONTRIBUTION	15,000	CHECK			

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.

<b>(a)</b> Type of grant or assistance	<b>(b)</b> Region	<b>(c)</b> Number of recipients	<b>(d)</b> Amount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> Amount of non-cash assistance	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)

**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, don't 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, don't 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).

ReturnReference	Explanation

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I  
(Form 990)**

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

OMB No 1545-0047

**2018**

**Open to Public  
Inspection**

Department of the  
Treasury  
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
▶ **Attach to Form 990.**  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization  
AMERICAN FEDERATION OF LABOR AND  
CONGRESS OF INDUSTRIAL ORGANIZATIONS

Employer identification number  
53-0228172

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 23

3 Enter total number of other organizations listed in the line 1 table ▶ 96

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	CERTAIN ENTITIES ARE REQUIRED TO SUBMIT PROGRAM REPORTS PERIODICALLY



**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 53-0228172  
**Name:** AMERICAN FEDERATION OF LABOR AND  
CONGRESS OF INDUSTRIAL ORGANIZATIONS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
A PHILIP RANDOLPH INSTITUTE 815 16TH ST NW WASHINGTON, DC 20006	13-2548181	501(C)4	133,000	26,448	BOOK	OFFICE SPACE	OPERATING SUBSIDY, OFFICE SPACE
AFL-CIO LAWYERS' COORDINATING COMMITTEE 815 16TH ST NW WASHINGTON, DC 20006	52-1304063	501(C)5	0	82,409	BOOK	CONFERENCE EXPENSES	CONFERENCE EXPENSES

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ALASKA STATE AFL-CIO 3333 DENALI ST STE 125 ANCHORAGE, AK 99503	92-0010498	501(C)5	10,000				ALASKA CENTER CONTRIBUTION
ALLIANCE FOR RETIRED AMERICANS 815 16TH ST NW WASHINGTON, DC 20006	52-2277805	501(C)4	600,000				OPERATING SUBSIDY

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY 815 16TH ST NW WASHINGTON, DC 20006	52-1984713	501(C)5	325,000				OPERATING SUBSIDY, ILAW PROJECT
AMERICAN FEDERATION OF TEACHERS 555 NEW JERSEY AVE NW WASHINGTON, DC 20001	36-0725240	501(C)5	6,000				LSUS GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
APRI BALTIMORE CHAPTER 5800 METRO DRIVE 2ND FL BALTIMORE, MD 21215	13-6280232	501(C)3	15,000				PROGRAM SUPPORT
APRI GREATER KANSAS CITY CHAPTER 6022 BROOKLYN ROAD KANSAS CITY, MO 64130	43-1712995	501(C)3	21,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
APRI PITTSBURGH CHAPTER 60 BLVD OF THE ALLIES STE 200 PITTSBURGH, PA 15222	80-0564629	501(C)3	20,000				PROGRAM SUPPORT
APRI ST LOUIS CHAPTER 3210 BRUNSWICK DRIVE FLORISSANT, MO 63033	43-1900251	501(C)3	28,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ARIZONA AFL-CIO 3117 N 16TH ST STE 200 PHOENIX, AZ 85016	86-6053031	501(C)5	150,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT
ARKANSAS AFL-CIO 1115 BISHOP STREET LITTLE ROCK, AR 72202	71-0282493	501(C)5	40,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ASIAN PACIFIC AMERICAN LABOR ALLIANCE 815 16TH ST NW WASHINGTON, DC 20006	52-1777961	501(C)5	0	17,289	BOOK	OFFICE SPACE	OFFICE SPACE
CALIFORNIA LABOR FEDERATION AFL-CIO 600 GRAND AVENUE SUITE 410 OAKLAND, CA 94610	94-0362030	501(C)5	110,000				SOLIDARITY FUNDING GRANT, RESEARCH CONTRIB

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CAPITAL AREA FOOD BANK 4900 PUERTO RICO AVE NE WASHINGTON, DC 20007	52-1167581	501(C)3	10,000				GENERAL CONTRIBUTION
CENTER FOR POPULAR DEMOCRACY ACTION FUND 449 TROUTMAN STREET SUITE A BROOKLYN, NY 11237	45-3860271	501(C)4	40,000				GENERAL CONTRIBUTION



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CENTRAL FLORIDA AFL-CIO PO BOX 560779 ORLANDO, FL 32856	59-2201402	501(C)5	22,500				SOLIDARITY FUNDING GRANT
CENTRAL LABOR COUNCIL OF NASHVILLE AND MIDDLE TENNESSEE PO BOX 290153 NASHVILLE, TN 37229	62-0592210	501(C)5	80,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CINCINNATI AFL-CIO LABOR COUNCIL 1385 TENNESSEE AVENUE CINCINNATI, OH 45229	31-0623251	501(C)5	70,000				SOLIDARITY FUNDING GRANT
CLIMATE JOBS NY EDUCATION FUND INC 275 7TH AVENUE 18TH FL NEW YORK, NY 10001	82-4972836	NON PROFIT	50,000				GENERAL CONTRIBUTION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
COALITION OF BLACK TRADE UNIONISTS 1150 17TH ST NW SUITE 300 WASHINGTON, DC 20036	52-1128179	501(C)5	123,000				OPERATING SUBSIDY, GENERAL CONTRIBUTION
COALITION OF LABOR UNION WOMEN 815 16TH STREET NW 2ND FLR WASHINGTON, DC 20006	23-7451023	501(C)5	124,400	20,082	BOOK	OFFICE SPACE	OPERATING SUBSIDY, PROGRAM SUPPORT, OFFICE SPACE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
COLORADO AFL-CIO 140 SHERIDAN BLVD SUITE 201 DENVER, CO 80226	84-0457306	501(C)5	200,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT
COMMITTEE ON STATES 1575 I STREET NW 425 WASHINGTON, DC 20005	26-3815183	PARTNERSHIP	25,000				GENERAL CONTRIBUTION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
COMMUNICATIONS WORKERS OF AMERICA 501 3RD ST NW WASHINGTON, DC 20001	53-0246709	501(C)5	6,000				LSUS GRANT
CONGRESSIONAL HISPANIC CAUCUS INSTITUTE INC 1128 16TH ST NW WASHINGTON, DC 20036	52-1114225	501(C)3	8,700				GENERAL CONTRIBUTION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CONNECTICUT AFL-CIO 56 TOWN LINE ROAD ROCKY HILL, CT 06067	06-0303260	501(C)5	65,000				SOLIDARITY FUNDING GRANT
DALLAS AFL-CIO COUNCIL 1408 N WASHINGTON STE 240 DALLAS, TX 75204	75-0944659	501(C)5	216,108				SOLIDARITY FUNDING GRANT, CULTURE OF HEALTH GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
DE MARILLAC ACADEMY 50 FRANCISCO STREET 235 SAN FRANCISCO, CA 94133	94-3390330	501(C)3	15,000				GENERAL CONTRIBUTION
DEMOCRACY ALLIANCE 1575 EYE ST NW WASHINGTON, DC 20005	20-2130918	TAXABLE NONPROFIT	70,000				GENERAL CONTRIBUTION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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DENVER AREA LABOR FEDERATION AFL-CIO 7760 W 38TH AVE STE 200 WHEAT RIDGE, CO 80033	84-0467109	501(C)5	35,000				PROGRAM SUPPORT
EASTERN CONNECTICUT AREA LABOR FEDERATION 22 ORANGE STREET HARTFORD, CT 06106	06-0728794	501(C)5	45,000				SOLIDARITY FUNDING GRANT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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ECONOMIC POLICY INSTITUTE 1225 EYE ST NW STE 600 WASHINGTON, DC 20005	52-1368964	501(C)3	25,000				PROGRAM SUPPORT
ELIJAH CUMMINGS YOUTH PROGRAM IN ISRAEL 5750 PARK HEIGHTS AVE BALTIMORE, MD 21215	52-2136761	501(C)3	10,000				GENERAL CONTRIBUTION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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FLORIDA AFL-CIO 135 SOUTH MONROE STREET TALLAHASSEE, FL 32301	59-0832847	501(C)5	412,100				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT
GEORGIA STATE AFL-CIO 501 PULLIAM STREET SW 549 ATLANTA, GA 30312	58-0682149	501(C)5	183,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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GREAT RIVER AREA LABOR FEDERATION AFL-CIO 4600 46TH AVE STE 4 ROCK ISLAND, IL 61201	36-2412229	501(C)5	35,000				SOLIDARITY FUNDING GRANT
GREATER BOSTON LABOR COUNCIL AFL-CIO 6 BEACON ST STE 910 BOSTON, MA 02108	04-1103070	501(C)5	45,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
GREATER SOUTHEASTERN MASSACHUSETTS LABOR COUNCIL 556 PLEASANT STREET NEW BEDFORD, MA 02740	51-0428056	501(C)5	25,000				SOLIDARITY FUNDING GRANT
HAWKEYE AREA LABOR COUNCIL AFL-CIO 1211 WILEY BLVD SW CEDAR RAPIDS, IA 52404	42-0918529	501(C)5	35,000				SOLIDARITY FUNDING GRANT

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HIGH GROUND ACTION FUND INC 544 E OGDEN AVENUE STE 700-144 MILWAUKEE, WI 53202	81-2132531	501(C)4	15,000				GENERAL CONTRIBUTION
HOOSIER HEARTLAND AREA LABOR FEDERATION AFL-CIO 2917 ROOSEVELT AVE INDIANAPOLIS, IN 46218	35-1017434	501(C)5	60,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HURON VALLEY AREA LABOR FEDERATION AFL-CIO 3435 BRENTWOOD COURT ANN ARBOR, MI 48108	38-1441064	501(C)5	45,000				SOLIDARITY FUNDING GRANT
IDAHO STATE AFL-CIO PO BOX 2238 BOISE, ID 83701	82-0131464	501(C)5	50,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ILLINOIS AFL-CIO 534 S 2ND ST SPRINGFIELD, IL 62701	35-6065267	501(C)5	100,000				PROGRAM SUPPORT
INDIANA STATE AFL-CIO 1701 W 18TH ST INDIANAPOLIS, IN 46202	35-1015469	501(C)5	83,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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INSTITUTE FOR ASIAN PACIFIC AMERICAN LEADERSHIP & ADVANCEMENT 815 16TH ST NW WASHINGTON, DC 20006	27-4284628	501(C)3	126,400				OPERATING SUBSIDY, PROGRAM SUPPORT
INTL FEDERATION OF PROFESSIONAL AND TECHNICAL ENGINEERS 501 3RD ST NW WASHINGTON, DC 20001	53-0088460	501(C)5	6,000				LSUS GRANT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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IOWA FEDERATION OF LABOR AFL-CIO 2000 WALKER ST STE A DES MOINES, IA 50317	42-0781361	501(C)5	50,000				PROGRAM SUPPORT
JOBS TO MOVE AMERICA 525 S HEWITT STREET LOS ANGELES, CA 90013	81-5339041	501(C)3	50,000	188	BOOK	MEETING EXPENSES	PROGRAM SUPPORT, MEETING EXPENSES

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
JOBS WITH JUSTICE 1616 P STREET NW 150 WASHINGTON, DC 20036	52-1865575	501(C)4	32,000				GENERAL CONTRIBUTION
KANSAS AFL-CIO 2131 SW 36TH ST TOPEKA, KS 66611	48-0628333	501(C)5	30,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
KENTUCKY STATE AFL-CIO 140 KINGS DAUGHTER DR FRANKFORT, KY 40601	61-0546763	501(C)5	30,000				SOLIDARITY FUNDING GRANT
LABOR COMMUNITY AT WORK INC 633 S HAWLEY RD STE 110 MILWAUKEE, WI 53214	87-0704197	501(C)3	9,800				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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LABOR COUNCIL FOR LATIN AMERICAN ADVANCEMENT 815 16TH STREET NW WASHINGTON, DC 20006	52-1002207	501(C)3	111,400	31,420	BOOK	OFFICE SPACE	OPERATING SUBSIDY, PROGRAM SUPPORT, OFFICE SPACE
LABOR HERITAGE FOUNDATION 815 16TH STREET NW WASHINGTON, DC 20006	52-1313015	501(C)3	0	24,141	BOOK	OFFICE SPACE	OFFICE SPACE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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LABOR OF LOVE 815 16TH STREET NW WASHINGTON, DC 20006	59-1361955	501(C)3	6,000				GENERAL CONTRIBUTION
MAINE AFL-CIO 21 GABRIEL DRIVE AUGUSTA, ME 04330	01-0113840	501(C)5	85,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MARTIN LUTHER KING JR COUNTY LABOR COUNCIL 2800 FIRST AVENUE SUITE 206 SEATTLE, WA 98121	91-0170700	501(C)5	30,000				SOLIDARITY FUNDING GRANT
MASSACHUSETTS AFL-CIO 389 MAIN ST MALDEN, MA 02148	04-2254301	501(C)5	15,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
METAL TRADES DEPARTMENT 815 16TH ST NW WASHINGTON, DC 20006	53-0025758	501(C)5	0	11,463	BOOK	OFFICE SPACE	OFFICE SPACE
MICHIGAN STATE AFL-CIO 419 WASHINGTON SQ S SUITE 200 LANSING, MI 48933	38-0830700	501(C)5	180,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MID-MICHIGAN AREA LABOR COUNCIL AFL-CIO PO BOX 5905 SAGINAW, MI 48603	38-1581561	501(C)5	30,000				SOLIDARITY FUNDING GRANT
MILWAUKEE AREA LABOR COUNCIL AFL-CIO 633 S HAWLEY RD STE 110 MILWAUKEE, WI 53214	39-0965630	501(C)5	40,000				SOLIDARITY FUNDING GRANT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MINNESOTA AFL-CIO 175 AURORA AVENUE ST PAUL, MN 55103	41-0785271	501(C)5	380,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT
MISSISSIPPI AFL-CIO PO BOX 3379 JACKSON, MS 39207	64-0354605	501(C)5	10,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MISSOURI AFL-CIO 227 JEFFERSON STREET JEFFERSON CITY, MO 65101	44-0150375	501(C)5	150,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT
MONTANA STATE AFL-CIO 810 HIALEAH COURT HELENA, MT 59601	81-0171147	501(C)5	95,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE 4805 MOUNT HOPE DRIVE BALTIMORE, MD 21215	13-1084135	501(C)4	15,000				EVENT SPONSORSHIP
NATIONAL ASSOCIATION OF LETTER CARRIERS 100 INDIANA AVE NW WASHINGTON, DC 20001	53-0114650	501(C)5	0	33,494	BOOK	BAGS FOR ANNUAL FOOD DRIVE	BAGS FOR ANNUAL FOOD DRIVE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NATIONAL COALITION ON BLACK CIVIC PARTICIPATION INC 1050 CONNECTICUT AVE NW STE 500 WASHINGTON, DC 20036	52-1253112	501(C)3	50,000				PROGRAM SUPPORT
NATIONAL EMPLOYMENT LAW PROJECT 75 MAIDEN LANE STE 601 NEW YORK, NY 10038	13-2758558	501(C)3	25,000				GENERAL CONTRIBUTION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NATIONAL LABOR COLLEGE 10000 NEW HAMPSHIRE AVE SILVER SPRING, MD 20903	52-0895834	501(C)3	975,000				OPERATING SUBSIDY
NEBRASKA STATE AFL-CIO 2012 SOUTH 13TH STREET LINCOLN, NE 68502	47-0425431	501(C)5	30,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NEVADA STATE AFL-CIO 1891 WHITNEY MESA DR HENDERSON, NV 89014	88-0038900	501(C)5	50,000				SOLIDARITY FUNDING GRANT
NEW HAMPSHIRE AFL-CIO 161 LONDONBERRY TNP HOOKSETT, NH 03106	02-0241839	501(C)5	40,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NEW JERSEY STATE AFL-CIO 106 WEST STATE STREET TRENTON, NJ 08608	22-1153990	501(C)5	75,000				SOLIDARITY FUNDING GRANT
NEW YORK CITY CENTRAL LABOR COUNCIL AFL-CIO 275 SEVENTH AVE 18TH FL NEW YORK, NY 10001	13-5675894	501(C)5	78,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NORTH AMERICA'S BUILDING TRADES UNION 815 16TH STREET NW WASHINGTON, DC 20006	53-0025755	501(C)5	0	75,004	BOOK	OFFICE SPACE	OFFICE SPACE
NORTH CAROLINA STATE AFL- CIO 1408 HILLSBOROUGH STREET RALEIGH, NC 27605	56-0644841	501(C)5	63,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NORTH DAKOTA AFL-CIO 1323 EAST FRONT STREET BISMARCK, ND 58504	45-0173165	501(C)5	20,000				SOLIDARITY FUNDING GRANT
NORTH SHORE FEDERATION OF LABOR 3250 EUCLID AVE ROOM 250 CLEVELAND, OH 44415	34-0829670	501(C)5	54,200				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NORTH SHORE LABOR COUNCIL AFL-CIO 112 EXCHANGE STREET LYNN, MA 01901	23-7274671	501(C)5	35,000				SOLIDARITY FUNDING GRANT
OHIO AFL-CIO 395 E BROAD STREET 300 COLUMBUS, OH 43215	31-4425064	501(C)5	115,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
OHIO UNITY COALITION 500 S FRONT STREET SUITE 700 COLUMBUS, OH 43215	52-1253112	501(C)3	95,000				GENERAL CONTRIBUTION, PROGRAM SUPPORT
OKLAHOMA STATE AFL-CIO 501 NE 27TH ST OKLAHOMA CITY, OK 73105	73-0674439	501(C)5	33,450				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
OREGON AFL-CIO 3645 SE 32ND AVENUE PORTLAND, OR 97202	93-0471981	501(C)5	150,000				SOLIDARITY FUNDING GRANT
PEGGY BROWNING FUND 1528 WALNUT ST 1904 PHILADELPHIA, PA 19102	23-2887086	501(C)3	8,000	1,905	BOOK	MEETING EXPENSES	GENERAL CONTRIBUTION, MEETING EXPENSES

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PENNSYLVANIA AFL-CIO 600 N SECOND STREET HARRISBURG, PA 17101	23-1575065	501(C)5	325,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT
PHILADELPHIA COUNCIL OF THE AFL-CIO 22 S 22ND ST 2ND FL PHILADELPHIA, PA 19103	23-1580308	501(C)5	75,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PIERCE COUNTY CENTRAL LABOR COUNCIL AFL-CIO 3049 SOUTH 36TH ST SUITE 201 TACOMA, WA 98409	91-0124575	501(C)5	24,000				SOLIDARITY FUNDING GRANT
PRIDE AT WORK 815 16TH STREET NW WASHINGTON, DC 20006	52-2217817	501(C)5	101,400	17,289	BOOK	OFFICE SPACE	OPERATING SUBSIDY, OFFICE SPACE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PUERTO RICO FEDERATION OF LABOR AFL-CIO PO BOX 19689 SANTURCE, PR 00910	06-6044973	501(C)5	55,000				SOLIDARITY FUNDING GRANT
SAN DIEGO AND IMPERIAL COUNTIES LABOR COUNCIL AFL-CIO 3737 CAMINO DEL RIO S STE 403 SAN DIEGO, CA 92108	80-0180809	501(C)5	70,000				SOLIDARITY FUNDING GRANT

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SOLIDAGO FOUNDATION 150 MAIN ST SUITE 24 NORTHAMPTON, MA 01060	20-2963670	501(C)3	200,000				LIFT FUND GRANT
SOUTH CAROLINA AFL-CIO PO BOX 39 SWANSEA, SC 29160	57-0645960	501(C)5	30,000				SOLIDARITY FUNDING GRANT



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<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SOUTH CENTRAL FEDERATION OF LABOR AFL-CIO 1602 SOUTH PARK ST 228 MADISON, WI 53715	39-0934972	501(C)5	25,000				SOLIDARITY FUNDING GRANT
SOUTH CENTRAL IOWA FEDERATION OF LABOR AFL-CIO 2000 WALKER ST SUITE H DES MOINES, IA 50317	42-0784747	501(C)5	17,500				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SOUTH CENTRAL MICHIGAN AREA LABOR COUNCIL AFL-CIO PO BOX 3248 KALAMAZOO, MI 49003	38-2895546	501(C)5	39,000				SOLIDARITY FUNDING GRANT
SOUTH FLORIDA AFL-CIO 1525 NW 167TH ST 450 MIAMI, FL 33169	59-0828587	501(C)5	127,408				CULTURE OF HEALTH GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
TENNESSEE AFL-CIO LABOR COUNCIL 1901 LINDELL AVE NASHVILLE, TN 37203	62-0561921	501(C)5	105,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT
TEXAS AFL-CIO 1106 LAVACA ST SUITE 200 AUSTIN, TX 78701	74-1289747	501(C)5	241,200				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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TEXAS GULF COAST AREA LABOR FEDERATION AFL-CIO 2506 SUTHERLAND STREET HOUSTON, TX 77023	74-1356044	501(C)5	284,000				SOLIDARITY FUNDING GRANT, CULTURE OF HEALTH GRANT
THEODORE ROOSEVELT CONSERVATION PARTNERSHIP INC 1660 L ST NW SUITE 208 WASHINGTON, DC 20036	04-3706385	501(C)3	8,000				GENERAL CONTRIBUTION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UNITED MINE WORKERS OF AMERICA 18354 QUANTICO GATEWAY DRIVE TRIANGLE, VA 22172	53-0159200	501(C)5	0	5,188	BOOK	OFFICE SPACE	OFFICE SPACE
UNION SPORTSMEN'S ALLIANCE 3340 PERIMETER HILL DR NASHVILLE, TN 37211	27-2345009	501(C)4	115,000				GENERAL CONTRIBUTION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UNITED STUDENTS AGAINST SWEATSHOPS - AFGJ 1155 CONNECTICUT AVE NW 500 WASHINGTON, DC 20036	52-2094577	501(C)3	12,000				GENERAL CONTRIBUTION
UPPER PENINSULA REGIONAL LABOR FEDERATION PO BOX 129 MARQUETTE, MI 49855	38-2002956	501(C)5	35,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
VERMONT STATE LABOR COUNCIL AFL-CIO PO BOX 858 MONTPELIER, VT 05601	03-0164405	501(C)5	30,000				SOLIDARITY FUNDING GRANT
VIRGINIA AFL-CIO 5400 GLENSIDE DR STE E RICHMOND, VA 23228	54-0419003	501(C)5	15,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
WASHINGTON STATE LABOR COUNCIL AFL-CIO 321 16TH AVENUE S SEATTLE, WA 98144	91-0668471	501(C)5	30,000				SOLIDARITY FUNDING GRANT
WE ARE MISSOURI 227 JEFFERSON STREET JEFFERSON CITY, MO 65101	45-4754005	UNINCORPORATED ASSOC	0	190,275	BOOK	STAFF TIME	STAFF TIME



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
WEST VIRGINIA AFL-CIO 501 LEON SULLIVAN WAY SUITE 304 CHARLESTON, WV 25301	55-0417680	501(C)5	30,000				SOLIDARITY FUNDING GRANT
WESTERN CONNECTICUT AREA LABOR FEDERATION AFL-CIO 290 POST ROAD WEST WESTPORT, CT 06880	06-0684864	501(C)5	50,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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WESTERN IOWA LABOR FEDERATION AFL-CIO 3038 S LAKEPORT RD SUITE 110 SIOUX CITY, IA 51106	42-6077758	501(C)5	35,000				SOLIDARITY FUNDING GRANT
WISCONSIN STATE AFL-CIO 6333 WEST BLUE MOUND RD MILWAUKEE, WI 53213	39-0941964	501(C)5	175,000				SOLIDARITY FUNDING GRANT, PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
WORKING AMERICA 815 16TH STREET NW WASHINGTON, DC 20006	20-0263611	501(C)5	7,026,000	141,636	BOOK	OFFICE SPACE	OPERATING SUBSIDY, GENERAL CONTRIBUTION, OFFICE SPACE
WYOMING STATE AFL-CIO 500 RANDALL AVENUE CHEYENNE, WY 82001	83-0157300	501(C)5	46,000				SOLIDARITY FUNDING GRANT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
INTERNATIONAL LABOR COMMUNICATIONS ASSOCIATION 815 16TH ST NW WASHINGTON, DC 20006	53-0232074	501(C)5		6,225	BOOK	OFFICE SPACE	OFFICE SPACE

**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.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AMERICAN FEDERATION OF LABOR AND  
CONGRESS OF INDUSTRIAL ORGANIZATIONS

Employer identification number  
53-0228172

**Part I Questions Regarding Compensation**

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
<input checked="" type="checkbox"/> First-class or charter travel		
<input checked="" type="checkbox"/> Travel for companions		
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<b>b</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	<b>1b</b> Yes	
<b>2</b> 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?	<b>2</b>	No
<b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b> 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		
<b>a</b> Receive a severance payment or change-of-control payment?	<b>4a</b>	No
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?	<b>4b</b> Yes	
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	<b>4c</b>	No
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>		
<b>5</b> 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		
<b>a</b> The organization?	<b>5a</b>	
<b>b</b> Any related organization? If "Yes," on line 5a or 5b, describe in Part III	<b>5b</b>	
<b>6</b> 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		
<b>a</b> The organization?	<b>6a</b>	
<b>b</b> Any related organization? If "Yes," on line 6a or 6b, describe in Part III	<b>6b</b>	
<b>7</b> 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	<b>7</b>	
<b>8</b> 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	<b>8</b>	
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	<b>9</b>	



**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
SCHEDULE J, PART I, LINE 4B	<p>THE FEDERATION'S CONSTITUTION PROVIDES FOR A NON-QUALIFIED PENSION PLAN FOR THE AFL-CIO'S EXECUTIVE OFFICERS. IF THE BENEFITS PROVIDED UNDER THE CONSTITUTION ARE GREATER THAN THE BENEFITS PROVIDED BY THE AFL-CIO STAFF RETIREMENT PLAN, THEN THE DIFFERENCE IS PAYABLE BY THE GENERAL FUND. THE FEDERATION RECOGNIZED \$220,848 AND \$57,348 OF PENSION EXPENSES FOR THE YEARS ENDED JUNE 30, 2019 AND 2018, RESPECTIVELY, ATTRIBUTABLE TO THE ESTIMATED PRESENT VALUE OF FUTURE PENSION BENEFITS EXPECTED TO BE PAID FROM THE GENERAL FUND. THE FEDERATION'S ESTIMATED LIABILITY FOR PAYMENTS TO RETIRED AND CURRENT OFFICERS UNDER THIS PLAN WAS \$2,799,000 AND \$2,860,100 AT JUNE 30, 2019 AND 2018, RESPECTIVELY. IN SEPTEMBER 2013, THE EXECUTIVE COUNCIL APPROVED TWO CHANGES TO THE CONSTITUTION IN REGARDS TO THE EXECUTIVE OFFICER'S BENEFITS. THE EXECUTIVE COUNCIL HAS THE AUTHORITY TO MODIFY OR ELIMINATE THE OFFICER'S RETIREMENT BENEFITS AND THE NON-QUALIFIED PLAN IS NOT APPLICABLE TO EXECUTIVE OFFICERS ELECTED AFTER AUGUST 31, 2013.</p>







**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.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS	Employer identification number 53-0228172
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**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) UNION LABOR LIFE INSURANCE	THE COMPANY PROVIDES INSURANCE COVERAGE AND INVESTMENT SERVICES TO ORG	52,677	NINE OF THE OFFICERS OF THE ORGANIZATION, RICHARD TRUMKA, JAMES BOLAND, TERRY O'SULLIVAN, SEAN MCGARVEY, DEMAURICE SMITH, KINSEY ROBINSON, KENNETH RIGMAIDEN, JAMES CALLAHAN AND MARK MCMANUS ARE ALSO ON THE BOARD OF DIRECTORS OF UNION LABOR LIFE INSURANCE		No
(2)					No

**Part V Supplemental Information**

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

Return Reference	Explanation
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**SCHEDULE O**  
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**2018**  
**Open to Public Inspection**

Department of the Treasury

Name of the organization

AMERICAN FEDERATION OF LABOR AND  
CONGRESS OF INDUSTRIAL ORGANIZATIONS

Employer identification number

53-0228172

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	SOME OF THE OFFICERS OF THE ORGANIZATION SERVE ON THE SAME BOARD OF UNION LABOR LIFE INSURANCE COMPANY

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION A, LINE 6	THIS IS A MEMBERSHIP ORGANIZATION

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION A, LINE 7A	PER ARTICLE VI OF THE AFL-CIO CONSTITUTION THE OFFICERS SHALL BE ELECTED AT EVERY REGULAR QUADRENNIAL CONVENTION BY DELEGATES OF THE AFFILIATES

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION A, LINE 8B	NOT APPLICABLE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	AFL-CIO ATTORNEYS REVIEW FORM 990 WITH THE OFFICERS IN CONJUNCTION WITH THE AUDITORS PRIOR TO FILING



**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 12C	AFL-CIO GENERAL COUNSEL ANNUALLY SURVEYS ALL EMPLOYEES AND OFFICERS AND FOLLOWS UP ON ALL REPORTED INSTANCES

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	OFFICERS' COMPENSATION IS APPROVED BY THE EXECUTIVE COUNCIL SALARIES OF KEY EMPLOYEES ARE SET BY EXECUTIVE OFFICERS

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE ON IT'S WEBSITE

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART XI, LINE 9	CHANGE IN TEMPORARILY RESTRICTED NET ASSETS -2,160,172 CONTRIBUTIONS 1,275,000 NET ASSETS RELEASED FROM RESTRICTION

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2018**

**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.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AMERICAN FEDERATION OF LABOR AND  
CONGRESS OF INDUSTRIAL ORGANIZATIONS

**Employer identification number**

53-0228172

**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
<b>(1)</b> UNION PRIVILEGE 1125 15TH STREET NW SUITE 300 WASHINGTON, DC 20005 52-1457836	UP WAS ESTABLISHED TO OFFER SUPPLEMENTAL BENEFITS FOR UNION MEMBERS	DC		C				Yes	
<b>(2)</b> UNION PLUS MORTGAGE COMPANY 309 FELLOWSHIP ROAD SUITE 200 MT LAUREL, NJ 08054 81-4090141	UPMC WAS ESTABLISHED TO OFFER MORTGAGE LENDING TO UNION MEMBERS	NJ	AFL-CIO	C		120,179	72.190 %	Yes	

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

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

	Yes	No
<b>1</b> 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?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .	<b>Yes</b>	
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	<b>Yes</b>	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		<b>No</b>
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		<b>No</b>
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		<b>No</b>
<b>f</b> Dividends from related organization(s) . . . . .		<b>No</b>
<b>g</b> Sale of assets to related organization(s) . . . . .		<b>No</b>
<b>h</b> Purchase of assets from related organization(s) . . . . .		<b>No</b>
<b>i</b> Exchange of assets with related organization(s) . . . . .		<b>No</b>
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .	<b>Yes</b>	
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		<b>No</b>
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		<b>No</b>
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		<b>No</b>
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	<b>Yes</b>	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<b>Yes</b>	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	<b>Yes</b>	
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	<b>Yes</b>	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		<b>No</b>
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<b>Yes</b>	

**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) UNION PRIVILEGE	A	4,218	ACTUAL COST
(2) UNION PRIVILEGE	S	45,000	ACTUAL COST
(3) AFL-CIO COPE TREASURY FUND	R	4,770,956	ACTUAL COST
(4) AFL-CIO COPE TREASURY FUND	S	219,424	ACTUAL COST
(5) WORKING AMERICA COALITION POLITICAL ACTION COMMITTEE	S	7,804	ACTUAL COST





**Part VII**    **Supplemental Information**

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

<b>Return Reference</b>	<b>Explanation</b>

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 53-0228172  
**Name:** AMERICAN FEDERATION OF LABOR AND  
 CONGRESS OF INDUSTRIAL ORGANIZATIONS

**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
815 16TH STREET NW WASHINGTON, DC 20006 52-1304063	LEGAL COORDINATION AND EDUCATION AMONG LAWYERS SERVING AFL-CIO AFFILIATES	DC	501(C)(5)				No
8484 GEORGIA AVENUE SUITE 620 SILVER SPRING, MD 20910 52-2360920	COLLECTIVE BARGAINING AND RELATED ACTIVITIES	DC	501(C)(5)				No
888 16TH STREET NW 400 WASHINGTON, DC 20006 52-1984713	BETTERING THE LIVES OF WORKING MEN AND WOMEN WORLDWIDE	DC	501(C)(5)				No
1125 15TH STREET NW WASHINGTON, DC 20006 13-4237843	GROUP/OTHER INSURANCE COVERAGE, INTEREST FREE MORTGAGE LOANS TO MEMBERS	DC	501(C)(5)				No
815 16TH STREET NW WASHINGTON, DC 20006 20-0263611	COMMUNITY ORGANIZING OF NON-UNION HOUSEHOLDS	DC	501(C)(5)				No
815 16TH STREET NW WASHINGTON, DC 20006 53-0025755	FEDERATION OF UNIONS	DC	501(C)(5)				No
815 16TH STREET NW WASHINGTON, DC 20006 53-0231686	FEDERATION OF UNIONS	DC	501(C)(5)				No
815 16TH STREET NW WASHINGTON, DC 20006 53-0025758	FEDERATION OF UNIONS	DC	501(C)(5)				No
888 16TH STREET NW WASHINGTON, DC 20006 52-1673883	FEDERATION OF UNIONS	DC	501(C)(5)				No
815 16TH STREET NW WASHINGTON, DC 20006 52-1107237	FEDERATION OF UNIONS	DC	501(C)(5)				No
815 16TH STREET NW WASHINGTON, DC 20006 53-0025759	FEDERATION OF UNIONS	DC	501(C)(5)				No
815 16TH STREET NW WASHINGTON, DC 20006 52-0884503	CONNECT UNIONS TO ECONOMIC AND WORKPLACE DEVELOPMENT SYSTEMS	DC	501(C)(3)	LINE 7	N/A		No
888 16TH STREET NW 400 WASHINGTON, DC 20006 52-1984719	EDUCATE WORKERS ON THE RIGHT OF FREE ASSOCIATION TO PROMOTE DEMOCRATIC TRADE	DC	501(C)(3)	LINE 7	N/A		No
815 16TH STREET NW WASHINGTON, DC 20006 52-2184499	COORDINATING AND ADMINISTERING CHARITABLE GIVING OF UNION MEMBERS	DC	501(C)(3)	LINE 7	N/A		No
815 16TH STREET NW WASHINGTON, DC 20006 52-2257723	POLITICAL ACTION COMMITTEE	DC	527		AFL-CIO		No
815 16TH STREET NW WASHINGTON, DC 20006 53-0229679	POLITICAL ACTION COMMITTEE	DC	527		AFL-CIO		No
815 16TH STREET NW WASHINGTON, DC 20006 52-2257719	POLITICAL ACTION COMMITTEE	DC	527		AFL-CIO		No
815 16TH STREET NW WASHINGTON, DC 20006 83-1722811	POLITICAL ACTION COMMITTEE	DC	527		AFL-CIO		No
815 16TH STREET NW WASHINGTON, DC 20006 81-2534249	POLITICAL ACTION COMMITTEE	DC	527		AFL-CIO		No