

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07-01-2017, and ending 06-30-2018

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

C Name of organization
 AMERICAN FEDERATION OF TEACHERS AFL-CIO
 PARENT ORGANIZATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
 555 NEW JERSEY AVENUE NW

City or town, state or province, country, and ZIP or foreign postal code
 WASHINGTON, DC 20001

D Employer identification number
 36-0725240

E Telephone number
 (202) 879-4509

G Gross receipts \$ 232,706,815

F Name and address of principal officer:
 RANDI WEINGARTEN
 555 NEW JERSEY AVENUE NW
 WASHINGTON, DC 20001

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

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

J Website: ▶ WWW.AFT.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1916 **M** State of legal domicile: DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 THE AMERICAN FEDERATION OF TEACHERS, AFL-CIO (THE FEDERATION) IS COMMITTED TO ADVANCING AN AGENDA THAT PROVIDES EDUCATIONAL OPPORTUNITY, LIFTS THE DISADVANTAGED, REBUILDS THE MIDDLE CLASS, IMPROVES THE AMERICAN ECONOMY AND PUBLIC INFRASTRUCTURE, AND FOSTERS THE DEMOCRATIC PRINCIPLES OF RESPECT, DIGNITY AND ECONOMIC SECURITY FOR ALL THOSE WHO CALL AMERICA HOME AND SEEK THE AMERICAN DREAM. THE FEDERATION, WORKING WITH LOCAL AND STATE AFFILIATES, SEEKS TO ENSURE THAT THE EDUCATORS, HEALTHCARE PROVIDERS AND PUBLIC EMPLOYEES WHO MAKE UP OUR MEMBERSHIP HAVE THE TOOLS AND RESOURCES THEY NEED TO MAKE THIS VISION A REALITY. THE MAJOR SOURCE OF REVENUE TO THE FEDERATION IS PER CAPITA TAXES PAID BY LOCALS.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	46
4 Number of independent voting members of the governing body (Part VI, line 1b)	43
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	398
6 Total number of volunteers (estimate if necessary)	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	0	0
9 Program service revenue (Part VIII, line 2g)	197,544,001	226,287,593
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	879,646	1,356,599
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,570,648	1,563,508
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	200,994,295	229,207,700
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	536,788	548,017
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	61,656,976	61,114,047
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	147,235,133	130,523,014
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	209,428,897	192,185,078
19 Revenue less expenses. Subtract line 18 from line 12	-8,434,602	37,022,622

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	96,932,723	112,244,682
21 Total liabilities (Part X, line 26)	89,116,611	68,071,290
22 Net assets or fund balances. Subtract line 21 from line 20	7,816,112	44,173,392

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 2019-05-13

STACEY B JOHNSON CFO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name SUBRINA WOOD CPA	Preparer's signature SUBRINA WOOD CPA	Date	Check <input type="checkbox"/> if self-employed	PTIN P00365899
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		

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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:

SEE STATEMENT FOR PART I, LINE 1

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 \$)
 GENERAL MEMBERSHIP SERVICES: PROVIDED VARIOUS SERVICES AND SUPPORT TO APPROXIMATELY 1.5 MILLION MEMBERS IN 3,200 LOCAL AFFILIATES, INCLUDING EDUCATIONAL PROGRAMS, PUBLICATIONS AND ACCESS TO OTHER COMMUNICATIONS, INSURANCE PROGRAMS AND OTHER MEMBER BENEFITS, COLLECTIVE BARGAINING ADVICE AND RESEARCH.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
 CONFERENCES AND MEMBER ENGAGEMENT: PROVIDED ASSISTANCE VIA CONFERENCES AND TRAININGS TO STATE AND LOCAL AFFILIATES ON MEMBER ENGAGEMENT, COMMUNITY ENGAGEMENT, COLLECTIVE BARGAINING AND REPRESENTATION CAMPAIGNS, UNION ADMINISTRATION AND PROFESSIONAL ISSUES.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
 MEMBER RECRUITMENT WITHIN EXISTING LOCALS AND ORGANIZING OF NEW AFFILIATES

4d Other program services (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)

4e **Total program service expenses** ▶

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	Yes	
b	Did the organization report an amount for investments—other securities—in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
20b			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24b			
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
24d			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
25b			
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
28a			
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
28b			
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
28c			
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
35b			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question ID, question text, answer field, Yes, and No. Rows include questions 1a-1b, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, and 14a-14b.

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

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?		No
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:		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
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.)

		Yes	No
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?	Yes	
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?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	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

- 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 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:
 ▶ STACEY B JOHNSON 555 NEW JERSEY AVENUE NW WASHINGTON, DC 20001 (202) 662-4804

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			
(1) RANDI WEINGARTEN PRESIDENT	70.00	X		X			517,852	0	64,646	
(2) MARY CATHRYN RICKER EXEC VICE PRES.	60.00	X		X			327,191	0	77,132	
(3) LORRETTA JOHNSON SECRETARY-TREASURER	60.00	X		X			385,809	0	64,646	
(4) ADAM URBANSKI VICE PRES.	5.00	X		X			0	0	0	
(5) ALEX CAPUTO-PEARL VICE PRES.	5.00	X		X			0	0	0	
(6) ANDREW PALLOTTA VICE PRES.	5.00	X		X			0	0	0	
(7) ANN TWOMEY VICE PRES.	5.00	X		X			0	0	0	
(8) BARBARA BOWEN VICE PRES.	5.00	X		X			0	0	0	
(9) CANDICE OWLEY VICE PRES.	5.00	X		X			0	0	0	
(10) CATALINA FORTINO VICE PRES.	5.00	X		X			0	0	0	
(11) CHRISTINE CAMPBELL VICE PRES.	5.00	X		X			0	0	0	
(12) DANIEL J MONTGOMERY VICE PRES.	5.00	X		X			0	0	0	
(13) DAVID GRAY VICE PRES.	5.00	X		X			0	0	0	
(14) DAVID HECKER VICE PRES.	5.00	X		X			0	0	0	
(15) DAVID QUOLKE VICE PRES.	5.00	X		X			0	0	0	
(16) DENISE SPECHT VICE PRES.	5.00	X		X			0	0	0	
(17) DON CARLISTO VICE PRES.	5.00	X		X			0	0	0	

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

(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			
(18) ERIC FEAVER VICE PRES.	5.00	X		X				0	0	0
(19) EVELYN DEJESUS VICE PRES.	5.00	X		X				0	0	0
(20) FEDRICK C INGRAM VICE PRES.	5.00	X		X				0	0	0
(21) FRANK FLYNN VICE PRES.	5.00	X		X				0	0	0
(22) FREDERICK KOWAL VICE PRES.	5.00	X		X				0	0	0
(23) JAN HOCHADEL VICE PRES.	5.00	X		X				0	0	0
(24) JERRY JORDAN VICE PRES.	5.00	X		X				0	0	0
(25) JOANNE MCCALL VICE PRES.	5.00	X		X				0	0	0
(26) JOHN MCDONALD VICE PRES.	5.00	X		X				0	0	0
(27) JOSHUA PECHTHALT VICE PRES.	5.00	X		X				0	0	0
(28) KAREN LEWIS VICE PRES.	5.00	X		X				0	0	0
(29) KAREN MAGEE VICE PRES.	5.00	X		X				0	0	0
(30) KATHY A CHAVEZ VICE PRES.	5.00	X		X				0	0	0
(31) LARRY CARTER VICE PRES.	5.00	X		X				0	0	0
(32) LORRETTA JOHNSON VICE PRES.	5.00	X		X				0	0	0
(33) LOUIS Malfaro VICE PRES.	5.00	X		X				0	0	0
(34) MARIETTA ENGLISH VICE PRES.	5.00	X		X				0	0	0
(35) MARTIN MESSNER VICE PRES.	5.00	X		X				0	0	0
(36) MARY ARMSTRONG VICE PRES.	5.00	X		X				0	0	0
(37) MELISSA CROPPER VICE PRES.	5.00	X		X				0	0	0
(38) MICHAEL MULGREW VICE PRES.	5.00	X		X				0	0	0
(39) PAUL PECORALE VICE PRES.	5.00	X		X				0	0	0
(40) RICHARD STUTMAN VICE PRES.	5.00	X		X				0	0	0
(41) RUBY J NEWBOLD VICE PRES.	5.00	X		X				0	0	0
(42) SHELVEY Y ABRAMS VICE PRES.	5.00	X		X				0	0	0
(43) STEVE ROONEY VICE PRES.	5.00	X		X				0	0	0
(44) TED KIRSCH VICE PRES.	5.00	X		X				0	0	0
(45) TIM STOELB VICE PRES.	5.00	X		X				0	0	0
(46) WAYNE SPENCE VICE PRES.	5.00	X		X				0	0	0
(47) ZEPH CAPO VICE PRES.	5.00	X		X				0	0	0
(48) PHILIP KUGLER ASSIST. TO PRES. FOR ORGANIZATION & FIELD SERVC	60.00					X		241,966	0	77,132
(49) MICHAEL S POWELL ASSIST. TO PRES. FOR COMMUNICATIONS	60.00					X		237,097	0	64,275
(50) JESSICA SMITH CHIEF OF STAFF	60.00					X		241,650	0	81,242
(51) ANN J MITCHELL ASSIST. TO PRES. FOR FIELD COORDINATION	60.00					X		216,025	0	72,328
(52) MICHELLE A RINGUETTE ASSIST. TO PRES. FOR OFFICE OF THE PRESIDENT	60.00					X		217,687	0	72,328

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	2,385,277	0	573,729

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **178**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NEW TARGET INC 815 N ROYAL ST 100 ALEXANDRIA, VA 22314	IT SYSTEM SOFTWARE CONTRACTOR	2,671,513
K&R INDUSTRIES 14110 SULLYFIELD CR CHANTILLY, VA 20151	ADVERTISING CONSULTANT	1,367,591
MATRIX TRUST COMPANY 717 17TH STREET SUITE 1300 DENVER, CO 80202	TRUST SERVICES	699,879
TAG1 CONSULTING INC 2637 E ATLANTIC BLVD 21865 POMPANO BEACH, FL 33062	SOFTWARE CONSULTANT	652,396
STILLWATER SOLUTIONS 5045 FRANKLIN AVE WACO, TX 76710	CONSULTANT	450,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f: \$ _____						
h Total. Add lines 1a-1f							
Program Service Revenue			Business Code				
	2a MEMBERSHIP DUES		900099	200,295,931	200,295,931		
	b POSTRETIREMENT BENEFIT CREDIT		900099	20,273,601	20,273,601		
	c AFFILIATION FEE REBATE		900099	1,803,565	1,803,565		
	d INSURANCE PREMIUMS		900099	1,710,618	1,710,618		
	e PROGRAM ADMINISTRATION		900099	1,037,330	1,037,330		
	f All other program service revenue			1,166,548	1,166,548		
g Total. Add lines 2a-2f			226,287,593				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			940,617		940,617	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			1,091,625		1,091,625	
	6a Gross rents	(i) Real	(ii) Personal				
			466,950				
		b Less: rental expenses		0			
	c Rental income or (loss)		466,950				
	d Net rental income or (loss)			466,950		466,950	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			3,915,097				
		b Less: cost or other basis and sales expenses		3,499,115			
		c Gain or (loss)		415,982			
	d Net gain or (loss)			415,982		415,982	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11a REFUNDS-DEFUNCT LOCAL UNIONS		900099	4,933	4,933	0		
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d			4,933				
12 Total revenue. See Instructions.			229,207,700	226,292,526	0	2,915,174	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	548,017			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,475,447			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	40,092,811			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	8,933,076			
9 Other employee benefits	7,592,549			
10 Payroll taxes	3,020,164			
11 Fees for services (non-employees):				
a Management				
b Legal	7,537,561			
c Accounting	631,261			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	125,730			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,313,794			
12 Advertising and promotion	1,021,401			
13 Office expenses	8,115,299			
14 Information technology	145,603			
15 Royalties				
16 Occupancy				
17 Travel	2,373,322			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	4,231,982			
20 Interest				
21 Payments to affiliates	10,804,579			
22 Depreciation, depletion, and amortization	1,612,382			
23 Insurance	2,892,036			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a ORGANIZING	21,065,095			
b SOLIDARITY FUNDS	18,178,865			
c ASSISTANCE TO LOCALS	17,295,867			
d CONTRIBUTIONS	12,499,487			
e All other expenses	16,678,750			
25 Total functional expenses. Add lines 1 through 24e	192,185,078			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

Table with columns: (A) Beginning of year, (B) End of year. Rows include Assets (1-16) and Liabilities (17-26) and Net Assets or Fund Balances (27-34). Includes sub-rows 10a, 10b, 10c for land and depreciation.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	229,207,700
2	Total expenses (must equal Part IX, column (A), line 25)	2	192,185,078
3	Revenue less expenses. Subtract line 2 from line 1	3	37,022,622
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,816,112
5	Net unrealized gains (losses) on investments	5	-665,342
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	44,173,392

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
2a		No
2b	Yes	
2c		No
3a		No
3b		

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2017

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
Internal Revenue Service

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 TEACHERS AFL-CIO
PARENT ORGANIZATION

Employer identification number

36-0725240

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) ▶ \$ _____
- 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				
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.		
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?		

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.

Yes No

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047 2017 Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization AMERICAN FEDERATION OF TEACHERS AFL-CIO PARENT ORGANIZATION

Employer identification number 36-0725240

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.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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).
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.

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a, 2b, 2c, 2d.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
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)?
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:
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:

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 |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶
- b** Permanent endowment ▶
- c** Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,603,953	1,603,953	0
d Equipment		20,166,300	14,133,418	6,032,882
e Other		266,126	112,677	153,449
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				6,186,331

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	19,695,229	C
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	▶ 19,695,229	

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

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

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
ACCRUED EXPENSES AND OTHER LIABILITIES	17,891,199
ESTIMATED SELF-INSURANCE RESERVE	1,000,000
ACCRUED PENSION LIABILITY	12,212,427
ACCRUED POSTRETIREMENT HEALTHCARE COSTS	21,540,593
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	▶ 52,644,219

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	242,099,851
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-665,342	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	13,683,223	
e	Add lines 2a through 2d	2e		13,017,881
3	Subtract line 2e from line 1	3		229,081,970
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	125,730	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		125,730
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5		229,207,700

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	203,740,586
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	11,681,238	
e	Add lines 2a through 2d	2e		11,681,238
3	Subtract line 2e from line 1	3		192,059,348
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	125,730	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		125,730
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5		192,185,078

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
PART X, LINE 2:	THE FEDERATION ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE ACCOUNTING STANDARDS CODIFICATION (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 YEAR ENDED JUNE 30, 2018, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS. AS OF JUNE 30, 2018, THE STATUTE OF LIMITATIONS FOR THE TAX YEARS 2014 THROUGH 2016 REMAINS OPEN WITH THE U.S. FEDERAL JURISDICTION AND THE VARIOUS STATES AND LOCAL JURISDICTIONS IN WHICH THE FEDERATION FILES RETURNS.
PART XI, LINE 2D - OTHER ADJUSTMENTS:	REVENUE OF CONSOLIDATED SUBSIDIARY 13,690,530. RENTAL REVENUE INCLUDED ON FORM 990, LINE 6A -7,307.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES INCLUDED ON FORM 990, LINE 6B -7,307. EXPENSES OF CONSOLIDATED SUBSIDIARY 11,688,545.

Schedule I (Form 990)

OMB No. 1545-0047

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

2017

Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization AMERICAN FEDERATION OF TEACHERS AFL-CIO PARENT ORGANIZATION

Employer identification number 36-0725240

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?
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.

Table with 8 columns: (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. Row 1: (1) THE ALBERT SHANKER INSTITUTE, 52-1432693, 501(C)(3), 548,017, ADMINISTRATIVE ASSISTANCE.

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

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

Schedule J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization AMERICAN FEDERATION OF TEACHERS AFL-CIO PARENT ORGANIZATION

Employer identification number

36-0725240

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- First-class or charter travel
Travel for companions
Tax idemnification and gross-up payments
Discretionary spending account
Housing allowance or residence for personal use
Payments for business use of personal residence
Health or social club dues or initiation fees
Personal services (e.g., maid, chauffeur, chef)

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.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- Compensation committee
Independent compensation consultant
Form 990 of other organizations
Written employment contract
Compensation survey or study
Approval by the board or compensation committee

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a The organization?
b Any related organization?
If "Yes," on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a The organization?
b Any related organization?
If "Yes," on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Table with 3 columns: Question ID, Yes, No. Rows correspond to questions 1a, 1b, 2, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, 8, 9.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 RANDI WEINGARTEN PRESIDENT	(i)	437,470	0	80,382	54,000	10,646	582,498	0
	(ii)	0	0	0	0	0	- 0	0
2 MARY CATHRYN RICKER EXEC VICE PRES.	(i)	250,827	0	76,364	54,000	23,132	404,323	0
	(ii)	0	0	0	0	0	- 0	0
3 LORRETTA JOHNSON SECRETARY-TREASURER	(i)	300,390	0	85,419	54,000	10,646	450,455	0
	(ii)	0	0	0	0	0	- 0	0
4 PHILIP KUGLER ASSIST. TO PRES. FOR ORGANIZATION &	(i)	233,831	0	8,135	54,000	23,132	319,098	0
	(ii)	0	0	0	0	0	- 0	0
5 MICHAEL S POWELL ASSIST. TO PRES. FOR COMMUNICATIONS	(i)	233,170	0	3,927	53,629	10,646	301,372	0
	(ii)	0	0	0	0	0	- 0	0
6 JESSICA SMITH CHIEF OF STAFF	(i)	233,831	0	7,819	54,000	27,242	322,892	0
	(ii)	0	0	0	0	0	- 0	0
7 ANN J MITCHELL ASSIST. TO PRES. FOR FIELD COORDINAT	(i)	209,860	0	6,165	49,196	23,132	288,353	0
	(ii)	0	0	0	0	0	- 0	0
8 MICHELLE A RINGUETTE ASSIST. TO PRES. FOR OFFICE OF THE P	(i)	209,860	0	7,827	49,196	23,132	290,015	0
	(ii)	0	0	0	0	0	- 0	0

Schedule J (Form 990) 2017

Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	PART I - QUESTIONS REGARDING COMPENSATION: 1A FIRST-CLASS OR CHARTER TRAVEL: AFT OFFICERS AND VICE PRESIDENTS MAY FLY FIRST CLASS WHEN THE SCHEDULED FLIGHT TIME IS TWO HOURS OR LONGER. TRAVEL FOR COMPANIONS: IF OFFICERS OR VICE PRESIDENTS WOULD LIKE TO BRING A FAMILY MEMBER OR COMPANION WITH THEM ON TRAVEL AND THEY ARE ELIGIBLE FOR A FIRST CLASS TICKET, THEY MAY TAKE ADVANTAGE OF THE AFT "CONVERSION" POLICY. UNDER THIS POLICY, THEY ARE ENTITLED TO AIRFARE UP TO THE COST OF A SINGLE FIRST CLASS TICKET. FOR EXAMPLE, IF THEIR FIRST CLASS TICKET FOR A TRIP WOULD COST \$1,000, THEY CAN CONVERT THE TICKET TO COACH CLASS AND AFT WOULD COVER THE COST OF AN ADDITIONAL COACH TICKET FOR A COMPANION UP TO A TOTAL OF \$1,000. AS LONG AS THE COST OF THE COACH TICKETS IS EQUAL TO OR LESS THAN THE COST OF THE SINGLE FIRST CLASS TICKET, AFT WILL PAY FOR THE TICKETS. HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE: THE AFT OFFICERS RECEIVE A MONTHLY HOUSING ALLOWANCE.

Schedule J (Form 990) 2017

Software ID:

Software Version:

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2017

Open to Public Inspection

Department of the Treasury

Internal Revenue Service
Name of the organization

AMERICAN FEDERATION OF TEACHERS AFL-CIO
PARENT ORGANIZATION

Employer identification number

36-0725240

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS. THE MEMBERSHIP CONSISTS OF DIVISIONS OF PUBLIC AND PRIVATE SCHOOL TEACHERS, PARAPROFESSIONALS AND SCHOOL-RELATED PERSONNEL, HIGHER EDUCATION FACULTY AND PROFESSIONALS, NURSES, ALLIED HEALTH PROFESSIONALS AND OTHER HEALTH CARE EMPLOYEES, STATE AND LOCAL PUBLIC EMPLOYEES AND OTHER WORKERS.
FORM 990, PART VI, SECTION A, LINE 7A	THE EXECUTIVE COUNCIL IS ELECTED ON EVEN YEARS BY THE CONVENTION FOR A TERM OF 2 YEARS.
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS DRAFTED THROUGH A COLLABORATIVE EFFORT OF AFT'S OUTSIDE AUDIT FIRM AND IN-HOUSE FINANCIAL AND LEGAL PROFESSIONALS. THE DRAFT IS DISTRIBUTED TO THE EXECUTIVE TEAM FOR REVIEW PRIOR TO FILING. THE FORM IS THEN FINALIZED AND SUBMITTED.
FORM 990, PART VI, SECTION B, LINE 12C	A CONFLICT OF INTEREST QUESTIONNAIRE IS CIRCULATED ANNUALLY TO VICE PRESIDENTS AND ALL NEW VICE PRESIDENTS ARE PROVIDED WITH A COPY OF THE POLICY.
FORM 990, PART VI, SECTION B, LINE 15	AS STATED IN THE AFT CONSTITUTION, THE EXECUTIVE COUNCIL SHALL DETERMINE THE SALARY OF THE PRESIDENT. THERE IS A REVIEW OF COMPARABILITY OF SALARY WITH OTHER PEER GROUPS. AS STATED IN THE AFT CONSTITUTION, THE EXECUTIVE COUNCIL SHALL SET THE SALARY OF THE SECRETARY-TREASURER AND EXECUTIVE VICE PRESIDENT. THERE IS A REVIEW OF COMPARABILITY OF SALARY WITH OTHER PEER GROUPS.
FORM 990, PART VI, SECTION C, LINE 19	AFT'S FORM 990 IS AVAILABLE AS REQUIRED BY LAW UPON REQUEST. THE DEPARTMENT OF LABOR FORM LM-2 IS AVAILABLE ONLINE ON THE DOL WEBSITE DATABASE. AFT'S GOVERNING DOCUMENTS ALONG WITH AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S PUBLIC WEBSITE.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2017

Open to Public Inspection

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
AMERICAN FEDERATION OF TEACHERS AFL-CIO
PARENT ORGANIZATION

Employer identification number

36-0725240

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.

(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
(1) AMERICAN FEDERATION OF TEACHERS EDUCATIONAL FOUNDATION 555 NEW JERSEY AVE NW WASHINGTON, DC 20001 52-1439116	TO CONDUCT AND SPONSOR STUDY AND RESEARCH IN EDUCATIONAL AND RELATED FIELDS	DC	501(C)(3)	LINE 12B, II	AMERICAN FEDERATION OF TEACHERS		No
(2) AMERICAN FEDERATION OF TEACHERS BENEFIT TRUST 555 NEW JERSEY AVE NW WASHINGTON, DC 20001 52-1846907	TO PROVIDE WELFARE BENEFITS TO MEMBERS OF AFT	DC	501(C)(5)		AMERICAN FEDERATION OF TEACHERS		No
(3) 555 NEW JERSEY AVENUE NW INC 555 NEW JERSEY AVE NW WASHINGTON, DC 20001 52-1797147	TITLE HOLDING COMPANY	DC	501(C)(2)		AMERICAN FEDERATION OF TEACHERS		No
(4) AMERICAN FEDERATION OF TEACHERS COPE 555 NEW JERSEY AVE NW WASHINGTON, DC 20001 23-7269962	POLITICAL ACTION COMMITTEE	DC	527		AMERICAN FEDERATION OF TEACHERS		No
(5) AMERICAN FEDERATION OF TEACHERS COPE STATE AND LOCAL 555 NEW JERSEY AVE NW WASHINGTON, DC 20001 52-2256152	TO IMPROVE PUBLIC EDUCATION THROUGH INVOLVEMENT IN POLITICAL ACTIVITIES	DC	527		AMERICAN FEDERATION OF TEACHERS		No
(6) AFT DISASTER RELIEF FUND 555 NEW JERSEY AVENUE NW WASHINGTON, DC 20001 20-3664119	PROVIDING ASSISTANCE TO PERSONS AFFECTED BY NATURAL AND MAN-MADE DISASTERS	DC	501(C)(3)	LINE 12B, II	AMERICAN FEDERATION OF TEACHERS		No
(7) THE ALBERT SHANKER INSTITUTE 555 NEW JERSEY AVENUE NW WASHINGTON, DC 20001 52-1432693	TO CARRY ON, CONDUCT, AND SPONSOR STUDY AND RESEARCH IN EDUCATION	DC	501(C)(3)	509(A)(3) - TYPE 1	AMERICAN FEDERATION OF TEACHERS		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	
(1) CAPITOL PLACE I ASSOCIATES LIMITED PARTNERSHIP 555 NEW JERSEY AVENUE NW WASHINGTON, DC 20001 52-1293001	REAL ESTATE RENTAL	DC	AMERICAN FEDERATION OF TEACHERS	INVESTMENT				No			No	99.000 %

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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

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)CAPITOL PLACE I ASSOCIATES	K	3,125,666	

Part VII **Supplemental Information**

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

Return Reference	Explanation
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