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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 black lung benefit trust or private foundation)	OMB No 1545-0047
	The organization may have to use a copy of this return to satisfy state reporting requirements	2008 Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009				
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization AMERICAN FEDERATION OF TEACHERS AFL-CIO PARENT ORGANIZATION		D Employer identification number 36-0725240
		Doing Business As		E Telephone number (202) 879-4509
		Number and street (or P O box if mail is not delivered to street address) 555 NEW JERSEY AVENUE NW	Room/suite	G Gross receipts \$ 172,195,917
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20001		
F Name and address of Principal Officer ANTONIA CORTESE 555 NEW JERSEY AVENUE NW WASHINGTON, DC 20001		H(a) Is this a group return for affiliates? ☐ Yes ☒ No		
I Tax-exempt status ☒ 501(c) (5) (Insert no) ☐ 4947(a)(1) or ☐ 527		H(b) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list See instructions)		
J Web site: www.aft.org		H(c) Group Exemption Number		
K Type of organization ☒ Corporation ☐ trust ☐ association ☐ other		L Year of Formation 1916	M State of legal domicile DC	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities SEE SCHEDULE O		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	42
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	39
	5	Total number of employees (Part V, line 2a)	5	400
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	416,749
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	-143,759
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	154,117,732	162,735,119
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,362,334	811,385
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,434,863	2,272,698
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	159,914,929	165,819,202
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	485,251
14		Benefits paid to or for members (Part IX, column (A), line 4)		0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	43,741,959	48,288,933
16a		Professional fundraising fees (Part IX, column (A), line 11e)		0
b		(Total fundraising expenses, Part IX, column (D), line 25 ⁰)		
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	108,354,135	120,714,618
18		Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	152,581,345	169,577,254
19		Revenue less expenses Subtract line 18 from line 12	7,333,584	-3,758,052
Net Assets or Fund Balances			Beginning of Year	End of Year
	20	Total assets (Part X, line 16)	107,512,507	104,381,506
	21	Total liabilities (Part X, line 26)	45,872,776	46,973,050
	22	Net assets or fund balances Subtract line 21 from line 20	61,639,731	57,408,456

Part II Signature Block

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge			
	Signature of officer			2010-05-15 Date
	ANTONIA CORTESE SECRETARY-TREASURER Type or print name and title			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed ☐	Preparer's PTIN (See Gen Inst)
	Firm's name (or yours if self-employed), address, and ZIP + 4	CALIBRE CPA GROUP PLLC 1850 K STREET NW WASHINGTON, DC 20006		EIN
				Phone no (202) 331-9880

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

Part III

Statement of Program Service Accomplishments (See the instructions.)

1

Briefly describe the organization’s mission
SEE SCHEDULE O

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

YesNo

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?

YesNo

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses
Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts 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 TO APPROXIMATELY 1 4 MILLION MEMBERS INCLUDING COLLECTIVE BARGAINING, COMMUNICATIONS, INSURANCE PROGRAMS, EDUCATIONAL PROGRAMS, ANNUAL MEETINGS,ETC

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

CONFERENCES PROVIDED ASSISTANCE TO STATE AND LOCAL AFFILIATES WITH COLLECTIVE BARGAINING AND REPRESENTATION - TRAINING NEW LOCALS IN AREAS SUCH AS COLLECTIVE BARGAINING, CAMPAIGNS, AND UNION ADMINISTRATION

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

MEMBERSHIP RECRUITMENT, ETC

4d

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

4e

Total program service expenses \$ Must equal Part IX, Line 25, column (B).

Form 990 (2008)

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>	1	No
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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>	3	No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	No
6	Did the organization maintain any donor advised funds or any accounts where 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> 	6	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>	7	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> 	8	No
9	Did the organization report an amount in Part X, line 21, 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> 	9	No
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10	No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> 	11	Yes
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 	12	No
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? <i>If "Yes," complete Schedule F, Part I</i>	14b	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16	No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 	21	Yes
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> 	22	No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> 	23	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 questions 24b–24d and complete Schedule K. If "No," go to question 25</i>	24a	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) and 501(c)(4) 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>	25a	
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>	25b	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27	No

Part IV

Checklist of Required Schedules (Continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		No

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a282		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a400		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . Note: <i>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.</i>	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	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)?	4a		No
b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7a		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Part VI

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that 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 organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	Yes	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		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	
9a	Does the organization have local chapters, branches, or affiliates?	Yes	
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	Yes	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	Yes	
11	Is there any officer, director or 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

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13		No
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		No
14	Does 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		
15a	The organization's CEO, Executive Director, or top management official?	Yes	
15b	Other officers or key employees of the organization?	Yes	
	Describe the process in Schedule O		
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," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken 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 make these available. Check all that apply. ☐ own website ☐ another's website ☒ upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. KIM HARKNESS-JEROME 555 NEW JERSEY AVENUE NW WASHINGTON, DC 20001 (202) 879-4509

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

☐ Check this box if the organization did not compensate any officer, director, trustee or key employee

[illegible]

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(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				
1b Total									2,219,824	0	379,183

		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>	3	No
4	For any individual listed online 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>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

Form **990** (2008)

Part VIII

Statement of Revenue

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 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	2a	MEMBERSHIP DUES	900,099	157,037,476	157,037,476	
b		INSURANCE PREMIUMS	900,099	2,311,364	2,311,364		
c		AFFILIATION FEE REBATE	900,099	1,805,045	1,805,045		
d		CONFERENCES & MEETINGS	900,099	776,982	776,982		
e		PROGRAM ADMINISTRATION	900,099	726,148	726,148		
f		All other program service revenue		78,104	78,104		
g		Total. Add lines 2a-2f \$ 162,735,119					
Other Revenue		3	Investment income (including dividends, interest other similar amounts)		1,150,654		1,150,654
		4	Income from investment of tax-exempt bond proceeds				
	5	Royalties		1,744,081		1,744,081	
	6a	Gross Rents	(i) Real	(ii) Personal			111,868
			224,016				
			112,148				
			111,868				
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		111,868			111,868
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
			5,925,298				
			6,102,608	161,959			
			-177,310	-161,959			
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		-339,269			-339,269
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 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 Complete Schedule G if total exceeds \$15,000 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	ADVERTISING	541,800	371,925		371,925		
b	SUBSCRIPTIONS	541,900	44,824		44,824		
c							
d	All other revenue						
e	Total. Add lines 11a-11d \$ 416,749						
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		165,819,202	162,735,119	416,749	2,667,334	

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) but are not required to complete columns (B), (C), and (D).					
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 governments and organizations in the U S See Part IV, line 21	573,703			
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,599,007			
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	31,951,651			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	11,245,534			
10	Payroll taxes	2,492,741			
11	Fees for services (non-employees)				
a	Management				
b	Legal	6,155,995			
c	Accounting	404,798			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	9,189,538			
12	Advertising and promotion				
13	Office expenses	7,149,875			
14	Information technology				
15	Royalties				
16	Occupancy	3,505,518			
17	Travel	7,756,323			
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	3,943,041			
20	Interest	968			
21	Payments to affiliates	17,103,202			
22	Depreciation, depletion, and amortization	1,539,643			
23	Insurance	2,155,748			
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	ORGANIZING	25,606,806			
b	NATIONAL SOLIDARITY FUN	9,809,787			
c	SPECIAL PROJECTS	8,244,328			
d	Contributions	4,919,850			
e	PARTNERS IN POLITICAL E	4,386,423			
f	All other expenses	8,842,775			
25	Total functional expenses. Add lines 1 through 24f	169,577,254			
26	Joint Costs. Check ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1
	2	Savings and temporary cash investments	23,941,948	2 11,275,890
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	20,258,519	4 30,718,549
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6
	7	Notes and loans receivable, net	2,405,273	7 2,566,072
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	1,487,676	9 539,694
	10a	Land, buildings, and equipment cost basis		
		10a 15,249,301		
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>		
		10b 10,599,400	4,355,848	10c 4,649,901
	11	Investments—publicly traded securities	20,640,210	11 20,625,849
	12	Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	34,316,085	12 33,892,500
	13	Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13
14	Intangible assets		14	
15	Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	106,948	15 113,051	
16	Total assets. Add lines 1 through 15 (must equal line 34)	107,512,507	16 104,381,506	
Liabilities	17	Accounts payable and accrued expenses	13,200,905	17 10,470,881
	18	Grants payable		18
	19	Deferred revenue	48,338	19 301,990
	20	Tax-exempt bond liabilities		20
	21	Escrow account liability <i>Complete Part IV of Schedule D</i>		21
	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22
	23	Secured mortgages and notes payable to unrelated third parties		23
	24	Unsecured notes and loans payable		24
	25	Other liabilities <i>Complete Part X of Schedule D</i>	32,623,533	25 36,200,179
	26	Total liabilities. Add lines 17 through 25	45,872,776	26 46,973,050
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	61,639,731	27 57,408,456
	28	Temporarily restricted net assets		28
	29	Permanently restricted net assets		29
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
	33	Total net assets or fund balances	61,639,731	33 57,408,456
	34	Total liabilities and net assets/fund balances	107,512,507	34 104,381,506

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ cash ☒ accrual ☐ other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	No
b	Were the organization's financial statements audited by an independent accountant?	2b	No
c	If "Yes" to lines 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?	2c Yes	
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?	3a	No
b	If "Yes," did the organization undergo the required audit or audits?	3b	

Additional Data

Software ID:

Software Version:

EIN: 36-0725240

Name: AMERICAN FEDERATION OF TEACHERS AFL-CIO
PARENT ORGANIZATION

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
RANDI WEINGARTEN , PRESIDENT	60 00	X		X				110,241	0	16,414
EDWARD J MCELROY , PRESIDENT	50 00	X		X				405,927	0	5,266
NATHANIEL LACOUR , SEC/TREAS	50 00	X		X				326,960	0	5,266
ANTONIA CORTESE , SEC/TREAS	50 00	X		X				292,584	0	61,800
LORRETTA JOHNSON , EXEC VICE PRES	30 00	X		X				57,987	0	12,581
SHELVY ABRAMS , VICE PRES	5 00	X		X				0	0	0
MARY ARMSTRONG , VICE PRES	5 00	X		X				0	0	0
BARBARA BOWEN , VICE PRES	5 00	X		X				0	0	0
LINDA BRIDGES , VICE PRES	5 00	X		X				0	0	0
KENNETH BRYNIEN , VICE PRES	5 00	X		X				0	0	0
ELSIE P BURKHALTER , VICE PRES	5 00	X		X				0	0	0
STACY CARUSO-SHARPE , VICE PRES	5 00	X		X				0	0	0
KATHERINE CHAVEZ , VICE PRES	5 00	X		X				0	0	0
LEE CUTLER , VICE PRES	5 00	X		X				0	0	0
EDWARD DOHERTY , VICE PRES	5 00	X		X				0	0	0
KATHLEEN DONAHUE , VICE PRES	5 00	X		X				0	0	0
THOMAS DOOHER , VICE PRES	5 00	X		X				0	0	0
ERIC FEAVER , VICE PRES	5 00	X		X				0	0	0
ANDREW FORD , VICE PRES	5 00	X		X				0	0	0
ED GEPPERT JR , VICE PRES	5 00	X		X				0	0	0
DAVID GRAY , VICE PRES	5 00	X		X				0	0	0
JUDY HALE , VICE PRES	5 00	X		X				0	0	0
DAVID HECKER , VICE PRES	5 00	X		X				0	0	0
RICHARD IANNUZZI , VICE PRES	5 00	X		X				0	0	0
JERRY JORDAN , VICE PRES	5 00	X		X				0	0	0
DENNIS KELLY , VICE PRES	5 00	X		X				0	0	0
TED KIRSCH , VICE PRES	5 00	X		X				0	0	0
FRANCINE LAWRENCE , VICE PRES	5 00	X		X				0	0	0
ALAN LUBIN , VICE PRES	5 00	X		X				0	0	0
LOUIS Malfaro , VICE PRES	5 00	X		X				0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
MERLENE MARTIN , VICE PRES	5 00	X		X				0	0	0
MICHAEL MULGREW , VICE PRES	5 00	X		X				0	0	0
MARIA NEIRA , VICE PRES	5 00	X		X				0	0	0
RUBY NEWBOLD , VICE PRES	5 00	X		X				0	0	0
CANDICE OWLEY , VICE PRES	5 00	X		X				0	0	0
SHARON PALMER , VICE PRES	5 00	X		X				0	0	0
MARCIA REBACK , VICE PRES	5 00	X		X				0	0	0
LAURA RICO , VICE PRES	5 00	X		X				0	0	0
PAT SANTERAMO , VICE PRES	5 00	X		X				0	0	0
SANDRA SCHROEDER , VICE PRES	5 00	X		X				0	0	0
PHILLIP SMITH , VICE PRES	5 00	X		X				0	0	0
MARILYN STEWART , VICE PRES	5 00	X		X				0	0	0
ANN TWOMEY , VICE PRES	5 00	X		X				0	0	0
ADAM URBANSKI , VICE PRES	5 00	X		X				0	0	0
MIKE BENNER , GEN MANAGER, FINANCIAL	55 00					X		183,325	0	52,802
HARTINA FLOURNOY , ASSIST TO THE PRESIDENT	55 00					X		223,666	0	52,933
GREG HUMPHREY , EXEC ASSIST TO THE PRE	40 00					X		181,503	0	52,801
RON KROUSE , GEN MANAGER, OPERATIONS	55 00					X		221,605	0	59,660
PHIL KUGLER , ASSIST TO THE PRES FOR	55 00					X		216,026	0	59,660

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a MEMBERSHIP DUES	900,099	157,037,476	157,037,476		
b INSURANCE PREMIUMS	900,099	2,311,364	2,311,364		
c AFFILIATION FEE REBATE	900,099	1,805,045	1,805,045		
d CONFERENCES & MEETINGS	900,099	776,982	776,982		
e PROGRAM ADMINISTRATION	900,099	726,148	726,148		

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization AMERICAN FEDERATION OF TEACHERS AFL-CIO PARENT ORGANIZATION	Employer identification number 36-0725240
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate Contributions to (during year)	
3	Aggregate Grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes☐ No	

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 pleasure)☐ Preservation of an historically importantly land area ☐ Protection of natural habitat☐ Preservation of certified historic structure ☐ Preservation of open space	
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a	Total number of conservation easements	
b	Total acreage restricted by conservation easements	
c	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds?	☐ Yes☐ No
6	Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ▶	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing 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 170(h)(4)(B)(ii)?	☐ Yes☐ No
9	In Part XIV, 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" to Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 relating to these items	
a	Revenues included in 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 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 XIV

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

Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to 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 why in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to 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	Investment earnings or 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 year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

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

3a(i)

Yes

No

3a(ii)

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,736,183	1,720,957	15,226
d Equipment		13,513,118	8,878,443	4,634,675
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				4,649,901

Schedule D (Form 990) 2008

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other INVESTMENT IN CAPITOL PLACE I INVESTMENT LIMITED PARTNERSHIP	33,892,500	C
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	33,892,500	

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

(a) Description of Liability	(b) Amount
Federal Income Taxes	
ACCRUED EXPENSES AND OTHER LIABILITIES	15,975,572
ESTIMATED SELF-INSURANCE RESERVE	1,000,000
ACCRUED PENSION LIABILITY	6,923,469
ACCRUED POSTRETIREMENT HEALTHCARE COSTS	12,301,138
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	36,200,179

In Part XIV, 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

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	165,819,202
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	169,577,254
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-3,758,052
4	Net unrealized gains (losses) on investments	4	-473,223
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-473,223
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-4,231,275

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	167,027,134
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-473,223
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	1,681,155
e	Add lines 2a through 2d	2e	1,207,932
3	Subtract line 2e from line 1	3	165,819,202
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	165,819,202

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	171,544,119
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	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	1,966,865
e	Add lines 2a through 2d	2e	1,966,865
3	Subtract line 2e from line 1	3	169,577,254
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	169,577,254

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part XII, Line 2d - Other Adjustments		RENTAL EXPENSES INCLUDED ON FORM 990, LINE 6B 112148 REVENUE OF CONSOLIDATED SUBSIDIARY 1569007
Part XIII, Line 2d - Other Adjustments		RENTAL EXPENSES INCLUDED ON FORM 990, LINE 6B 112148 EXPENSES OF CONSOLIDATED SUBSIDIARY 1854717

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the U.S.

OMB No 1545-0047

2008

Open to Public
Inspection

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

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?

☐ 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 Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed.

1(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 non-cash assistance	(h) Purpose of grant or assistance
THE ALBERT SHANKER INSTITUTE555 NEW JERSEY AVENUE NW WASHINGTON,DC 20001	52-1432693	501(C)(3)	573,703				ADMINISTRATIVE ASSISTANCE

2

Enter total number of section 501(c)(3) and government organizations

3

Enter total number of other organizations

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e) Method of valuation (book, FMV , appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

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

Employer identification number

36-0725240

Part I Questions Regarding Compensation			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☒ First class or charter travel	☒ Housing allowance or residence for personal use		
	☒ Travel for companions	☐ Payments for business use of personal residence		
	☒ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☒ Personal services (e g , maid, chauffeur, chef)		
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	☒ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☐ Compensation survey or study		
	☐ Form 990 of other organizations	☐ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in 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?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
EDWARD J MCELROY	(i)	235,302		170,625		5,266	411,193	50,366
	(ii)							
NATHANIEL LACOUR	(i)	188,707		138,253		5,266	332,226	43,786
	(ii)							
ANTONIA CORTESE	(i)	240,738		51,846	55,370	6,430	354,384	
	(ii)							
MIKE BENNER	(i)	175,721		7,604	41,193	11,609	236,127	
	(ii)							
HARTINA FLOURNOY	(i)	216,803		6,863	47,870	5,063	276,599	
	(ii)							
GREG HUMPHREY	(i)	175,721		5,782	41,193	11,608	234,304	
	(ii)							
RON KROUSE	(i)	212,862		8,743	48,052	11,608	281,265	
	(ii)							
PHIL KUGLER	(i)	204,978		11,048	48,052	11,608	275,686	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

[illegible]

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

OMB No 1545-0047

2008

Open to Public Inspection

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

Employer identification number
36-0725240

Identifier	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.

Identifier	Return Reference	Explanation
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.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		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.

Identifier	Return Reference	Explanation
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.

Identifier	Return Reference	Explanation
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.

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Identifier	Return Reference	Explanation
FORM 990, PART I, LINE 1 & PART III, LINE 1		The mission of the American Federation of Teachers, AFL-CIO, is to improve the lives of our members and their families, to give voice to their legitimate professional, economic and social aspirations, to strengthen the institutions in which we work, to improve the quality of the services we provide, to bring together all members to assist and support one another, and to promote democracy, human rights and freedom in our union, in our nation and throughout the world.

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2B		THE FINANCIAL STATEMENTS WERE AUDITED ON A CONSOLIDATED BASIS.

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 12A & 13		THE ORGANIZATION HAS APPROVED A CONFLICT OF INTEREST POLICY AND A WHISTLEBLOWER POLICY. THE POLICIES WILL BE ADOPTED AT THE MAY 2010 BOARD MEETING.

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 14		THE ORGANIZATION FOLLOWS THE DOCUMENT RETENTION POLICIES OF THE INTERNAL REVENUE SERVICE AND THE DEPARTMENT OF LABOR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public Inspection

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
▶ See separate instructions.

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

Employer identification number

36-0725240

Part I

Identification of Disregarded Entities

(A) Name, address, and EIN 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

(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
AMERICAN FEDERATION OF TEACHERS EDUCATIONAL FOUNDATION 555 NEW JERSEY AVE NW WASHINGTON, DC20001 52-1439116	TO PROVIDE WELFARE BENEFITS TO MEMBERS OF EXEMPT LABOR ORGANIZATION	DC	501(C)(3)	509(A)(1) - TYPE 1	american federation of teachers
AMERICAN FEDERATION OF TEACHERS BENEFIT TRUST 555 NEW JERSEY AVE NW WASHINGTON, DC20001 52-1846907	TO CONDUCT AND SPONSOR STUDY AND RESEARCH IN EDUCATIONAL AND RELATED FIELDS	DC	501(C)(5)		american federation of teachers
555 NEW JERSEY AVENUE NW INC 555 NEW JERSEY AVE NW WASHINGTON, DC20001 52-1797147	TITLE HOLDING COMPANY	DC	501(C)(2)		american federation of teachers
AMERICAN FEDERATION OF TEACHERS COPE 555 NEW JERSEY AVE NW WASHINGTON, DC20001 23-7269962	political action committee	DC	527		american federation of teachers
AMERICAN FEDERATION OF TEACHERS COPE STATE AND LOCAL 555 NEW JERSEY AVE NW WASHINGTON, DC20001 52-2256152	TO IMPROVE PUBLIC EDUCATION THROUGH INVOLVEMENT IN POLITICAL ACTIVITIES	DC	527		american federation of teachers
AFT DISASTER RELIEF FUND 555 NEW JERSEY AVENUE NW WASHINGTON, DC20001 20-3664119	PROVIDING ASSISTANCE TO PERSONS AFFECTED BY NATURAL AND MAN-MADE DISASTERS	DC	501(C)(3)	509(A)(1) - TYPE 1	american federation of teachers
THE ALBERT SHANKER INSTITUTE 555 NEW JERSEY AVENUE NW WASHINGTON, DC20001 52-1432693	TO CARRY ON, CONDUCT, AND SPONSOR STUDY AND RESEARCH IN EDUCATION	DC	501(C)(3)	509(A)(1) - TYPE 1	american federation of teachers

Part III Identification of Related Organizations Taxable as a Partnership

(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, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No
CAPITOL PLACE I ASSOCIATES LIMITED PARTNERSHIP 555 NEW JERSEY AVENUE NW WASHINGTON, DC20001 52-1293001	REAL ESTATE RENTAL	DC	AMERICAN FEDERATION OF TEACHERS	INVESTMENT	-205,450	41,209,231		No			No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(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

Part V

Transactions with Related Organizations

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

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

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

Yes

1q

Yes

1r

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds		
(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1) See Additional Data Table		
(2)		
(3)		
(4)		
(5)		
(6)		

Schedule R (Form 990) 2008

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Software ID:
Software Version:
EIN: 36-0725240
Name: AMERICAN FEDERATION OF TEACHERS AFL-CIO
PARENT ORGANIZATION

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 501(c)(3))	(F) Direct Controlling Entity
AMERICAN FEDERATION OF TEACHERS EDUCATIONAL FOUNDATION 555 NEW JERSEY AVE NW WASHINGTON, DC20001 52-1439116	TO PROVIDE WELFARE BENEFITS TO MEMBERS OF EXEMPT LABOR ORGANIZATION	DC	501(C)(3)	509(A)(1) - TYPE 1	american federation of teachers
AMERICAN FEDERATION OF TEACHERS BENEFIT TRUST 555 NEW JERSEY AVE NW WASHINGTON, DC20001 52-1846907	TO CONDUCT AND SPONSOR STUDY AND RESEARCH IN EDUCATIONAL AND RELATED FIELDS	DC	501(C)(5)		american federation of teachers
555 NEW JERSEY AVENUE NW INC 555 NEW JERSEY AVE NW WASHINGTON, DC20001 52-1797147	TITLE HOLDING COMPANY	DC	501(C)(2)		american federation of teachers
AMERICAN FEDERATION OF TEACHERS COPE 555 NEW JERSEY AVE NW WASHINGTON, DC20001 23-7269962	political action committee	DC	527		american federation of teachers
AMERICAN FEDERATION OF TEACHERS COPE STATE AND LOCAL 555 NEW JERSEY AVE NW WASHINGTON, DC20001 52-2256152	TO IMPROVE PUBLIC EDUCATION THROUGH INVOLVEMENT IN POLITICAL ACTIVITIES	DC	527		american federation of teachers
AFT DISASTER RELIEF FUND 555 NEW JERSEY AVENUE NW WASHINGTON, DC20001 20-3664119	PROVIDING ASSISTANCE TO PERSONS AFFECTED BY NATURAL AND MAN-MADE DISASTERS	DC	501(C)(3)	509(A)(1) - TYPE 1	american federation of teachers
THE ALBERT SHANKER INSTITUTE 555 NEW JERSEY AVENUE NW WASHINGTON, DC20001 52-1432693	TO CARRY ON, CONDUCT, AND SPONSOR STUDY AND RESEARCH IN EDUCATION	DC	501(C)(3)	509(A)(1) - TYPE 1	american federation of teachers

Form 990, Schedule R, Part V - Transactions with Related Organizations

(A) Name of other organization		(B) Transaction type(a-r)	(C) Amount Involved (\$)
(1)	AMERICAN FEDERATION OF TEACHERS BENEFIT TRUST	P	334,420
(2)	AMERICAN FEDERATION OF TEACHERS EDUCATIONAL FOUNDATION	P	1,088,008
(3)	AMERICAN FEDERATION OF TEACHERS COPE STATE AND LOCAL	Q	687,806
(4)	THE ALBERT SHANKER INSTITUTE	Q	336,492
(5)	THE ALBERT SHANKER INSTITUTE	B	573,703
(6)	AMERICAN FEDERATION OF TEACHERS EDUCATIONAL FOUNDATION	B	1,000,000
(7)	AMERICAN FEDERATION OF TEACHERS BENEFIT TRUST	B	419,732
(8)	AFT DISASTER RELIEF FUND	B	1,200,000