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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) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047
		2010
		Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 06-01-2010 and ending 05-31-2011		
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC	D Employer identification number 53-0246709
	Doing Business As	E Telephone number (202) 434-1100
	Number and street (or P O box if mail is not delivered to street address) 501 3RD STREET NW	
	Room/suite	
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20001	
	F Name and address of principal officer ANN HILL 501 3RD STREET NW WASHINGTON, DC 20001	H(a) Is this a group return for affiliates? ☐ Yes ☒ No
		H(b) Are all affiliates 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.CWA-UNION.ORG		
K Form of organization ☐ Corporation ☐ Trust ☒ Association ☐ Other ▶		L Year of formation 1949
		M State of legal domicile DC

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities EXEMPT LABOR ORGANIZATION UNDER INTERNAL REVENUE CODE SECTION 501(C)(5) 																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td>3 Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>23</td></tr><tr><td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>5</td></tr><tr><td>5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)</td><td>5</td><td>543</td></tr><tr><td>6 Total number of volunteers (estimate if necessary)</td><td>6</td><td>0</td></tr><tr><td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>161,229</td></tr><tr><td>b Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td>0</td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	23	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	5	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	543	6 Total number of volunteers (estimate if necessary)	6	0	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	161,229	b Net unrelated business taxable income from Form 990-T, line 34	7b	0						
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Revenue	<table><tr><td>8 Contributions and grants (Part VIII, line 1h)</td><td>Prior Year</td><td>Current Year</td></tr><tr><td>9 Program service revenue (Part VIII, line 2g)</td><td>89,429</td><td>0</td></tr><tr><td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td><td>137,476,447</td><td>131,789,231</td></tr><tr><td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>12,132,824</td><td>18,884,278</td></tr><tr><td>12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>6,991,479</td><td>4,631,984</td></tr><tr><td></td><td>156,690,179</td><td>155,305,493</td></tr></table>	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	9 Program service revenue (Part VIII, line 2g)	89,429	0	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	137,476,447	131,789,231	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12,132,824	18,884,278	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,991,479	4,631,984		156,690,179	155,305,493						
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Expenses	<table><tr><td>13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)</td><td>5,438,974</td><td>5,163,038</td></tr><tr><td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td><td>138,513</td><td>35,364</td></tr><tr><td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>74,522,114</td><td>76,522,588</td></tr><tr><td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td><td>0</td><td>0</td></tr><tr><td>b Total fundraising expenses (Part IX, column (D), line 25) ▶⁰</td><td></td><td></td></tr><tr><td>17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)</td><td>67,340,725</td><td>71,553,243</td></tr><tr><td>18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>147,440,326</td><td>153,274,233</td></tr><tr><td>19 Revenue less expenses Subtract line 18 from line 12</td><td>9,249,853</td><td>2,031,260</td></tr></table>	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,438,974	5,163,038	14 Benefits paid to or for members (Part IX, column (A), line 4)	138,513	35,364	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	74,522,114	76,522,588	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–24f)	67,340,725	71,553,243	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	147,440,326	153,274,233	19 Revenue less expenses Subtract line 18 from line 12	9,249,853	2,031,260
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Net Assets or Fund Balances	<table><tr><td></td><td>Beginning of Current Year</td><td>End of Year</td></tr><tr><td>20 Total assets (Part X, line 16)</td><td>561,530,894</td><td>585,244,530</td></tr><tr><td>21 Total liabilities (Part X, line 26)</td><td>309,606,519</td><td>309,767,624</td></tr><tr><td>22 Net assets or fund balances Subtract line 21 from line 20</td><td>251,924,375</td><td>275,476,906</td></tr></table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	561,530,894	585,244,530	21 Total liabilities (Part X, line 26)	309,606,519	309,767,624	22 Net assets or fund balances Subtract line 21 from line 20	251,924,375	275,476,906												
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Part II	Signature Block
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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		2012-04-12			
			Date			
Paid Preparer Use Only	Print/Type preparer's name SCOTT E HALLBERG		Preparer's signature SCOTT E HALLBERG	Date	Check if self-employed ☐	PTIN
	Firm's name ▶ CALIBRE CPA GROUP PLLC					Firm's EIN ▶
	Firm's address ▶ 1850 K STREET NW WASHINGTON, DC 20006					Phone no ▶ (202) 331-9880
May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No						

Part II

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization’s mission

SEE SCHEDULE O FOR DETAILS

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 exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 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 \$)

TO ORGANIZE WORKERS FOR THE ECONOMIC, MORAL, AND SOCIAL ADVANCEMENT OF THEIR CONDITION AND STATUS TO ASSIST WORKERS BY PROVIDING ECONOMIC ASSISTANCE DUE TO STRIKES AND DEATHS

4b

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

4c

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

4d

Other program services (Describe in Schedule O)

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

4e

Total program service expenses \$

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?		No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	Yes	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
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? If "Yes," complete Schedule C, Part III	Yes	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		No
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		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? If "Yes," complete Schedule D, Part VI.	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? If "Yes," complete Schedule D, Part VII.	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? If "Yes," complete Schedule D, Part VIII.		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? If "Yes," complete Schedule D, Part IX.		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	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)? If "Yes," complete Schedule D, Part X.		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	Yes	
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 U S ? If "Yes," complete Schedule F, Parts II and IV		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 U S ? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part 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? If "Yes," complete Schedule G, Part II		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States 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 of grants and other assistance to individuals in the United States 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, 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>	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 lines 24b–24d and complete Schedule K. If "No," go to line 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	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	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, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		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>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		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>	32		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>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	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 ☒ No			
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>	36		
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>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance		
Check if Schedule O contains a response to any question in this Part V ☐		
		YesNo
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a443
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?	1cYes
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.	2a543
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2bYes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3aYes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3bYes
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)?	4aYes
b	If "Yes," enter the name of the foreign country: CA, UK, GM See instructions for 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?	5aNo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5bNo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6aYes
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6bYes
7	Organizations that may receive deductible contributions under section 170(c).	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a
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 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	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8
9	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
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b
c	Enter the amount of reserves on hand.	13c
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14aNo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	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 to any question 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	23		
b	Enter the number of voting members included in line 1a, above, who are independent	5		
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?	2		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?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	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?	10b	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		No
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	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?	16a	Yes	
b	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?	16b	Yes	

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. ANN HILL SECRETARY-TREAS 501 3RD STREET NW WASHINGTON, DC 20001 (202) 434-1100

Check if Schedule O contains a response to any question in this Part VII ☐ ☒

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

Form **990** (2010)

Part VII

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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				
See Additional Data Table											
1b Sub-Total											
c Total from continuation sheets to Part VII, Section A											
d Total (add lines 1b and 1c)								4,198,236	0	541,789	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶89

		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 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>	4	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>	5	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

(A) Name and business address	(B) Description of services	(C) Compensation
DELTA AIRLINES PO BOX 101153 ATLANTA, GA 30392	AIRLINE	1,809,582
UNITED AIRLINES INC 233 S WACKER DR 15TH FL CHICAGO, IL 60606	AIRLINE	1,759,194
STEVEN WEISSMAN 80 PINE STREET 33RD FL NEW YORK, NY 10005	LAW FIRM	1,188,000
METRO K LLC C/O GRUBBS ELLIS MGMT SERVICES IN BALTIMORE, MD 21263	RENTAL AGENT	1,002,894
AUTOMOTIVE RENTAL INC 9000 MIDLANTIC DRIVE MOUNT LAUREL, NJ 08054	CAR RENTAL	764,725
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 165		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 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		Business Code			
		MEMBERSHIP DUES	900099	131,789,231	131,789,231		
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f		131,789,231			
Other Revenue		3	Investment income (including dividends, interest and other similar amounts)		11,441,130		
	4	Income from investment of tax-exempt bond proceeds . . .					
	5	Royalties		1,612,645			1,612,645
	6a	Gross Rents	(i) Real	(ii) Personal			
	b	Less rental expenses	8,087,290				
	c	Rental income or (loss)	6,604,189				
	d	Net rental income or (loss)	1,483,101		1,483,101	161,229	1,321,872
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b	Less cost or other basis and sales expenses	1,445,302,933				
	c	Gain or (loss)	1,437,859,785				
	d	Net gain or (loss)	7,443,148		7,443,148	7,443,148	
	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	MISC RECEIPTS	900099	1,515,728	1,515,728			
b	ANNUAL CONFERENCE CONT	900099	20,510	20,510			
c							
d	All other revenue						
e	Total. Add lines 11a-11d		1,536,238				
12	Total revenue. See Instructions		155,305,493	140,768,617	161,229	14,375,647	

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	5,163,038			
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	35,364			
5	Compensation of current officers, directors, trustees, and key employees	4,628,999			
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	36,630,919			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,307,285			
9	Other employee benefits	26,128,037			
10	Payroll taxes	2,827,348			
a	Fees for services (non-employees) Management				
b	Legal	4,891,723			
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	37,000			
g	Other	2,257,720			
12	Advertising and promotion				
13	Office expenses	3,208,087			
14	Information technology	877,861			
15	Royalties				
16	Occupancy	7,388,754			
17	Travel	5,094,369			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,390,869			
20	Interest	2,349,181			
21	Payments to affiliates	51,710			
22	Depreciation, depletion, and amortization	1,584,699			
23	Insurance	11,733			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	STRATEGIC INDUSTRY FUND	15,696,952			
b	AFA MEC ADMIN	9,178,834			
c	OTHER EXPENSES	6,403,685			
d	ORGANIZING	5,528,849			
e	AFFILIATION DUES	4,307,489			
f	All other expenses	1,293,728			
25	Total functional expenses. Add lines 1 through 24f	153,274,233			
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) 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)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			3,977,159	1	3,856,884
	2	Savings and temporary cash investments			27,306,308	2	14,306,770
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			16,977,109	4	14,777,501
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Schedule L				6	
	7	Notes and loans receivable, net			13,922,818	7	13,055,071
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	74,687,980	44,646,666	10c	43,421,349
	b	Less: accumulated depreciation	10b	31,266,631			
	11	Investments—publicly traded securities			289,094,726	11	312,690,520
	12	Investments—other securities. See Part IV, line 11			162,611,076	12	179,825,617
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			2,995,032	15	3,310,818
16	Total assets. Add lines 1 through 15 (must equal line 34)			561,530,894	16	585,244,530	
Liabilities	17	Accounts payable and accrued expenses			25,843,264	17	25,396,582
	18	Grants payable				18	
	19	Deferred revenue			317,065	19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			40,501,648	23	43,061,644
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			242,944,542	25	241,309,398
	26	Total liabilities. Add lines 17 through 25			309,606,519	26	309,767,624
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			251,924,375	27	275,476,906
	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			251,924,375	33	275,476,906
	34	Total liabilities and net assets/fund balances			561,530,894	34	585,244,530

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	155,305,493
2	Total expenses (must equal Part IX, column (A), line 25)	2	153,274,233
3	Revenue less expenses Subtract line 2 from line 1	3	2,031,260
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	251,924,375
5	Other changes in net assets or fund balances (explain in Schedule O)	5	21,521,271
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	275,476,906

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
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?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 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	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☒ Both consolidated and separated basis		
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?		No
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		

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

If the organization answered “Yes,” to 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,” to 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,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC	Employer identification number 53-0246709
---	--

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	
2	Political expenditures	▶ \$
3	Volunteer hours	

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 funtion 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) CWA - COPE	501 3RD STREET NW WASHINGTON,DC 20001	52-0246709		101,448

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

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															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		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		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

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

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	PART I-A, LINE 1	THE ORGANIZATION COLLECTED POLITICAL CONTRIBUTIONS FROM THE LOCAL'S DUES COLLECTION AND FROM EMPLOYEE'S PAYROLL AND WAS PROMPTLY TRANSFERRED TO THE SEPARATE POLITICAL ORGANIZATION

SCHEDULE D
(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC	Employer identification number 53-0246709
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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 for any other purpose conferring 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 a 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, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____
7	Amount of expenses incurred in monitoring, inspecting, 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 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

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 the arrangement in Part XIV and complete the following table

	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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	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) Accumulated depreciation	(d) Book value
1a Land		12,232,213		12,232,213
b Buildings		50,309,223	24,484,746	25,824,477
c Leasehold improvements		1,222,863	905,070	317,793
d Equipment		9,978,164	5,072,560	4,905,604
e Other		945,517	804,255	141,262
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				43,421,349

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	155,305,493
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	153,274,233
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,031,260
4	Net unrealized gains (losses) on investments	4	20,965,524
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	555,747
9	Total adjustments (net) Add lines 4 - 8	9	21,521,271
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	23,552,531

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	184,350,576
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	20,965,524
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	8,079,559
e	Add lines 2a through 2d	2e	29,045,083
3	Subtract line 2e from line 1	3	155,305,493
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	155,305,493

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	159,878,422
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 XIV)	2d	6,604,189
e	Add lines 2a through 2d	2e	6,604,189
3	Subtract line 2e from line 1	3	153,274,233
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	153,274,233

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 IV, 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. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
PART XI, LINE 8 - OTHER ADJUSTMENTS		IUE TRANSFER 1,475,370 EFFECT OF ADOPTION OF SFAS 158 -919,623
PART XII, LINE 2D - OTHER ADJUSTMENTS		IUE TRANSFER 1,475,370 BUILDING OPERATIONS 6,604,189
PART XII, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT EXPENSES
PART XIII, LINE 2D - OTHER ADJUSTMENTS		BUILDING OPERATIONS 6,604,189
PART XIII, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT EXPENSES

Employer identification number
53-0246709

3 Activites per Region (Use Part V If additional space is needed)

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2010

1

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Part V if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐

Yes

☒

No

Part V

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

Identifier	Return Reference	Explanation
METHOD USED TO ACCCOUNT FOR EXPENDITURES		SCHEDULE F, PART I, LINE 3 BANK FEES AND REIMBURSEMENT PAYMENTS TO REGIONAL COUNCIL MEMBERS EXPENDITURES WERE ACCOUNTED THROUGH THE ORGANIZATION'S CASH DISBURSEMENT PROCESS

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC

Employer identification number
53-0246709

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" to 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. Part II can be duplicated if additional space is needed. ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

2

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

9

3

Enter total number of other organizations

21

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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
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Software ID:

Software Version:

EIN: 53-0246709

Name: COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
AFA SCHOLARSHIP FUND2 EAGLE BLUFF STREET FREDERICKSBURG, VA 22406	52-1908779	501(C)-3	5,000				GENERAL SUPPORT
CENTER FOR AMERICAN PROGRESS ACTION FUND 1333 H ST NW 10TH FLR WASHINGTON,DC 20005	30-0192708	501(C)-4	10,000				GENERAL SUPPORT
ECONOMIC POLICY INSTITUTE133 H ST NW STE 300 EAST TOWER WASHINGTON,DC 20005	52-1368964	501(C)-3	66,470				GENERAL SUPPORT
HEALTH CARE FOR AMERICA NOW1825 K STREET NW STE 400 WASHINGTON,DC 20006	52-1861766	501(C)-4	60,000				GENERAL SUPPORT
HOUSE MAJORITY PAC700 13TH STREET NW SUITE 600 WASHINGTON,DC 20005	41-1672898	527	50,000				GENERAL SUPPORT
INTERNATIONAL LABOR RIGHTS FORUM2001 S ST NW SUITE 420 WASHINGTON,DC 20009	52-1497461	501(C)-3	5,000				GENERAL SUPPORT
NATIONAL COALITION ON HEALTHCARE1200 G STREET N W STE 750 WASHINGTON,DC 20005	52-1687849	501(C)-3	25,000				GENERAL SUPPORT
NATIONAL CONSUMERS LEAGUE1701 K STREET NW STE 1200 WASHINGTON,DC 20006	53-0242038	501(C)-3	6,000				GENERAL SUPPORT
NATIONAL LABOR COLLEGE10000 NEW HAMPSHIRE AVENUE SILVER SPRING,MD 20903	52-0895834	501(C)-3	6,945				GENERAL SUPPORT
NEW JERSEY CITIZEN ACTION75 RARITAN AVENUE SUITE 200 HIGHLAND PARK,NJ 08904	22-2395222	501(C)-4	5,000				GENERAL SUPPORT
NEW JERSEY WORKING FAMILIES ALLIANCE30 CLINTON ST 3RD FLOOR NEWARK,NJ 07102	30-0427821	501(C)-4	25,000				GENERAL SUPPORT
NEW YORK CITY CENTRAL LABOR COUNCIL275 7TH AVENUE 18TH FLOOR NEW YORK,NY 10001	13-5675894	501(C)-5	5,000				GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
OHIO FAITH & DEMOCRACY COLLABORATIVE201 E COMMERCE SUITE 137 YOUNGSTOWN,OH 44503	26-3064170	501(C)-4	50,000				GENERAL SUPPORT
ONE NATION WORKING TOGETHER INC310 WEST 43RD ST 5TH FL NEW YORK,NY 10036	27-3098269	501(C)-4	50,000				GENERAL SUPPORT
OREGON WORKING FAMILIES CAMPAIGN1130 SW MORRISON ST STE 407 PORTLAND,OR 97205	20-5472324	527	20,000				GENERAL SUPPORT
POLICY MATTERS OHIO 3631 PERKINS AVE STE 4C E CLEVELAND,OH 44114	34-1921881	501(C)-3	50,000				GENERAL SUPPORT
PRIDE AT WORK AFL-CIO 815 16TH STREET NW WASHINGTON,DC 20006	52-2217817	501(C)-4	5,075				GENERAL SUPPORT
REFORM CALIFORNIA2404 WILSHIRE BLVD LOS ANGELES,CA 90057	95-4787336	501(C)-3	10,000				GENERAL SUPPORT
SACRAMENTO CENTRAL LABOR COUNCIL AFL-CIO 2840 EL CENTRO RD 111 SACRAMENTO,CA 95833	94-0824720	501(C)-5	10,000				GENERAL SUPPORT
STATE UNITY FUND815 16TH STREET NW WASHINGTON,DC 20006	53-0228172	501(C)-5	100,000				GENERAL SUPPORT
STRONG ECONOMY FOR ALL COALITION52 BROADWAY NEW YORK,NY 10004	27-4329476	501(C)-3	50,000				GENERAL SUPPORT
THE AMER FRIENDS OF YITZHAK RABIN CTR866 SECOND AVE 10TH FLR NEW YORK,NY 10017	13-3962392	501(C)-3	10,000				GENERAL SUPPORT
THE AMERICAN WORKER 607 14TH STREET NW WASHINGTON,DC 20005	91-0591206	501(C)-3	25,000				GENERAL SUPPORT
THE LEADERSHIP CONFERENCE1629 K ST NW 10TH FLOOR WASHINGTON,DC 20006	52-0789800	501(C)-4	15,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
US ACTION1825 K ST NW STE 210 WASHINGTON,DC 20006	52-2214305	501(C)-3	20,000				GENERAL SUPPORT
UTAH WORKING FAMILIES CAMPAIGN2261 S REDWOOD ROAD SUITE M SALT LAKE CITY,UT 84119	87-0231247	501(C)-5	25,000				GENERAL SUPPORT
WE ARE OHIO545 E TOWN ST COLUMBUS,OH 43215	45-0713721	501(C)-4	1,000,000				GENERAL SUPPORT
WEST VIRGINIA AFL-CIO 501 LEON SULLIVAN WAY 3RD FL CHARLESTON,WV 25301	55-0417680	501(C)-5	10,000				GENERAL SUPPORT
WOMENS CAMPAIGN FORUM1900 L STREET NW SUITE500 WASHINGTON,DC 20036	20-3846776	501(C)-4	5,000				GENERAL SUPPORT
WORKING AMERICA815 16TH ST NW WASHINGTON,DC 20006	20-2035052	501(C)-3	255,000				GENERAL SUPPORT

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC

Employer identification number
53-0246709

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 ☐ 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 the expenses described above? If "No," complete Part III to explain	1b	
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	
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 ☐ 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 in 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 from the organization or a related organization?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
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		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
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	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	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 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) Retirement and other 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 reportable compensation				
See Additional Data Table								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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.

Identifier	Return Reference	Explanation
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Software ID:

Software Version:

EIN: 53-0246709

Name: COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(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				
JUDITH DENNIS	(i) (ii)	162,038 0	0 0	0 0	5,281 0	8,514 0	175,833 0	0 0
ANN HILL	(i) (ii)	180,483 0	0 0	0 0	5,439 0	8,514 0	194,436 0	0 0
JAMES CLARK	(i) (ii)	164,249 0	0 0	0 0	5,281 0	14,670 0	184,200 0	0 0
LAWRENCE COHEN	(i) (ii)	203,280 0	0 0	0 0	5,753 0	85,814 0	294,847 0	0 0
JEFFREY RECHENBACH	(i) (ii)	184,444 0	0 0	0 0	5,528 0	14,670 0	204,642 0	0 0
JASPER GURGANUS	(i) (ii)	153,782 0	0 0	0 0	5,281 0	14,670 0	173,733 0	0 0
BERNARD LUNZER	(i) (ii)	171,585 0	0 0	3,250 0	5,281 0	14,670 0	194,786 0	0 0
CHRISTOPHER SHELTON	(i) (ii)	165,598 0	0 0	0 0	5,281 0	14,670 0	185,549 0	0 0
CLARENCE MILBURN	(i) (ii)	161,239 0	0 0	1,430 0	5,281 0	14,670 0	182,620 0	0 0
EDWARD MOONEY	(i) (ii)	151,554 0	0 0	0 0	1,682 0	14,670 0	167,906 0	0 0
JAMES WEITKAMP	(i) (ii)	161,271 0	0 0	0 0	5,281 0	10,258 0	176,810 0	0 0
MARY TAYLOR	(i) (ii)	157,759 0	0 0	0 0	5,281 0	14,670 0	177,710 0	0 0
RALPH MALY	(i) (ii)	164,334 0	0 0	0 0	5,281 0	14,670 0	184,285 0	0 0
RONALD COLLINS	(i) (ii)	164,631 0	0 0	0 0	5,281 0	8,514 0	178,426 0	0 0
SETH ROSEN	(i) (ii)	162,446 0	0 0	0 0	5,281 0	14,670 0	182,397 0	0 0
BROOKS SUNKETT	(i) (ii)	164,512 0	0 0	0 0	5,281 0	14,670 0	184,463 0	0 0
WILLIAM BOARMAN	(i) (ii)	163,850 0	0 0	0 0	3,600 0	8,514 0	175,964 0	0 0
MARY O'MELVENY	(i) (ii)	185,957 0	0 0	0 0	5,384 0	14,670 0	206,011 0	0 0
PETER MITCHELL	(i) (ii)	173,612 0	0 0	1,040 0	5,288 0	14,670 0	194,610 0	0 0
GEORGE KOHL	(i) (ii)	150,932 0	0 0	0 0	5,172 0	14,670 0	170,774 0	0 0
EDWARD SABOL	(i) (ii)	154,072 0	0 0	0 0	5,157 0	14,670 0	173,899 0	0 0
YVETTE HERRERA	(i) (ii)	154,637 0	0 0	0 0	5,157 0	14,670 0	174,464 0	0 0
THERESSA PLUTA	(i) (ii)	144,762 0	0 0	0 0	5,033 0	14,670 0	164,465 0	0 0
GAIL GANNON	(i) (ii)	157,564 0	0 0	0 0	5,157 0	8,514 0	171,235 0	0 0

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC	Employer identification number 53-0246709
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Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4		ADDED A LOCAL PRESIDENTS MEETING IN "OFF-CONVENTION" YEARS, CONSTITUTION - BI-ANNUAL CONVENTIONS, COMBINING OF TWO ADMINISTRATIVE UNITS, ELIMINATING A VP, MOVED TO A 4 YEAR ELECTION TERM EFFECTIVE 2011

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE MEMBERS OF THE ORGANIZATION ARE THE DELEGATES ELECTED BY THE LOCAL IN ACCORDANCE WITH THEIR RESPECTIVE BY LAWS OR RULES EACH LOCAL MAY ELECT AN ALTERNATE DELEGATE FOR EACH DELEGATE ELECTED WHO SHALL ATTEND THE CONVENTION IN THE EVENT THE DELEGATE IS UNABLE TO ATTEND

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		A LOCAL DELEGATE HAVE ONE VOTE BY SECRET BALLOT IN THE CONVENTION

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		DURING THE CONVENTION, THE LOCAL DELEGATE(S) HAVE ONE VOTE ON DECISIONS OF THE GOVERNING BODY

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		FORM 990 IS DRAFTED THROUGH A COLLABORATIVE EFFORT OF THE ORGANIZATION'S OUTSIDE AUDIT FIRM AND IN-HOUSE FINANCIAL AND LEGAL PROFESSIONALS. THE DRAFT IS DISTRIBUTED TO THE CWA EXECUTIVE COMMITTEE FOR REVIEW PRIOR TO FILING. THE FORM IS THEN FINALIZED AND SUBMITTED.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION OF THE TOP OFFICIALS AND OTHER OFFICERS ARE DETERMINED BY COMPARABILITY DATA AND REVIEWED BY THE BOARD APPOINTED BUDGET COMMITTEE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S DOCUMENTS ARE NOT AVAILABLE TO THE GENERAL PUBLIC THE ORGANIZATION MAKES DOCUMENTS AVAILABLE TO MEMBERS UPON REQUEST

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 20,965,524 IUE TRANSFER 1,475,370 EFFECT OF ADOPTION OF SFAS 158 -919,623 TOTAL TO FORM 990, PART XI, LINE 5 21,521,271

Identifier	Return Reference	Explanation
		THE SELECTION OF AN INDEPENDENT ACCOUNTANT AND THE OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS HAS NOT CHANGED FROM THE PRIOR FISCAL YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC

Employer identification number
53-0246709

Part I

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

(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 (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 organization	
						Yes	No
See Additional Data Table							

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) Disproporionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

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

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

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

Yes

No

No

Yes

Yes

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	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2010

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]

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Software ID:

Software Version:

EIN: 53-0246709

Name: COMMUNICATIONS WORKERS OF AMERICA AFL-CIO CLC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled organization	
						Yes	No
CWA PLAN FOR EMPLOYEES' PENSIONS 501 3RD STREET NW WASHINGTON, DC20001 53-0246709	BENEFIT PLAN	DC	501(A)				No
CWA 401(K) TAX DEFERRED SAVINGS PLAN 501 3RD STREET NW WASHINGTON, DC20001 53-0246709	BENEFIT PLAN	DC	501(A)				No
COMMUNICATIONS WORKERS RELIEF COMMITTEE 501 3RD STREET NW WASHINGTON, DC20001 52-6049044	TO RECEIVE AND ACCEPT DONATIONS, GIFT AND CONTRIBUTIONS TO BE USED TO PROVID	DC	501(C)(5)				No
CWA SAVINGS AND RETIREMENT TRUST 501 3RD STREET NW WASHINGTON, DC20001 52-1137722	BENEFIT PLAN	DC	501(A)				No
CWA HEALTH AND WELFARE TRUST 501 3RD STREET NW WASHINGTON, DC20001 52-1899918	BENEFIT PLAN	DC	501(C)(9)				No
CWA DISASTER RELIEF FUND 501 3RD STREET NW WASHINGTON, DC20001 52-2128973	TO PROVIDE DISASTER ASSISTANCE TO CURRENT AND FUTURE MEMBERS OF CWA	DC	501(C)(3)	509(A)(3) TYPE 1			No
IUE-CWA RETIREE PROGRAM 501 3RD STREET NW WASHINGTON, DC20001 53-0246709	TO RECEIVE AND ACCEPT DONATIONS, GIFT AND CONTRIBUTIONS TO BE USED TO PROVID	DC	501(A)				No
CWA JOE BEIRNE FOUNDATION 501 3RD STREET NW WASHINGTON, DC20001 52-2298284	TO DEVELOP, ESTABLISH AND FINANCE PROGRAMS TO PROVIDE AND ADVANCE	DC	501(C)(3)	509(A)(3) TYPE 1			No
CWA - COPE 501 3RD STREET NW WASHINGTON, DC20001 52-0246709	PAC FUND	DC	527				No
CWA NON-FEDERAL SEPARATE SEGREGATED FUND 501 3RD STREET NW WASHINGTON, DC20001 13-4128960	PAC FUND	DC	527				No
CWA - COPE VA 501 3RD STREET NW WASHINGTON, DC20001 52-2331196	PAC FUND	DC	527				No

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

(a) Name of other organization		(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(1)	CWA PLAN FOR EMPLOYEES' PENSIONS	M	113,000	SPACE ALLOCATION
(2)	CWA 401(K) TAX DEFERRED SAVINGS PLAN	M	113,000	SPACE ALLOCATION
(3)	COMMUNICATIONS WORKERS RELIEF COMMITTEE	M	38,000	SPACE ALLOCATION
(4)	CWA HEALTH AND WELFARE TRUST	M	19,000	SPACE ALLOCATION
(5)	CWA DISASTER RELIEF FUND	M	19,000	SPACE ALLOCATION
(6)	IUE-CWA RETIREE PROGRAM	M	19,000	SPACE ALLOCATION
(7)	CWA JOE BEIRNE FOUNDATION	M	19,000	SPACE ALLOCATION
(8)	CWA - COPE	M	75,000	SPACE ALLOCATION
(9)	CWA - COPE	P	182,192	SALARY REIMBURSEMENT
(10)	CWA SAVINGS AND RETIREMENT TRUST	P	13,300	RENT REIMBURSEMENT
(11)	CWA 401(K) TAX DEFERRED SAVINGS PLAN	Q	1,005,129	CONTRIBUTION AMOUNT

Additional Data

Software ID:

Software Version:

EIN: 53-0246709

Name: COMMUNICATIONS WORKERS OF AMERICA AFL-CIO
CLC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(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			
JUDITH DENNIS ADMIN DIR TO VP	40 00			X				162,038	0	13,795
VEDA SHOOK AFA INTL VP	40 00			X				99,146	0	18,545
ANN HILL EXECUTIVE VICE PRESIDENT	40 00			X				180,483	0	13,953
JAMES CLARK IUE-CWA DIVISION PRES	40 00			X				164,249	0	19,951
LAWRENCE COHEN PRESIDENT	40 00			X				203,280	0	91,567
JEFFREY RECHENBACH SECRETARY-TREASURER	40 00			X				184,444	0	20,198
JASPER GURGANUS TELECOM VICE PRESIDENT	40 00			X				153,782	0	19,951
BERNARD LUNZER TNG-CWA SECY-TREAS	40 00			X				174,835	0	19,951
CHRISTOPHER SHELTON VICE PRESIDENT	40 00			X				165,598	0	19,951
CLARENCE MILBURN VICE PRESIDENT	40 00			X				162,669	0	19,951
EDWARD MOONEY VICE PRESIDENT	40 00			X				151,554	0	16,352
JAMES WEITKAMP VICE PRESIDENT	40 00			X				161,271	0	15,539
MARY TAYLOR VICE PRESIDENT	40 00			X				157,759	0	19,951
RALPH MALY VICE PRESIDENT	40 00			X				164,334	0	19,951
RONALD COLLINS VICE PRESIDENT	40 00			X				164,631	0	13,795
SETH ROSEN VICE PRESIDENT	40 00			X				162,446	0	19,951
BROOKS SUNKETT VICE PRESIDENT - PW	40 00			X				164,512	0	19,951
CAROLYN WADE AT LARGE DIVERSITY	1 00			X				0	0	0
MADELINE ELDER AT LARGE DIVERSITY	1 00			X				0	0	0
NESTOR SOTO LOPEZ AT LARGE DIVERSITY	1 00			X				0	0	0
CLAUDE CUMMINGS AT LARGE DIVERSITY	1 00			X				0	0	0
AMBER ARNOLD AT LARGE DIVERSITY	1 00			X				0	0	0
JAMES JOYCE NABET PRESIDENT	40 00			X				134,779	0	13,490
KEVIN CREIGHAN AFA INTL SECY-TREAS	40 00				X			110,387	0	18,302
PATRICIA FRIEND AFA-CWA INTL PRESIDENT	40 00				X			126,832	0	11,839

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(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			
WILLIAM BOARMAN PRESIDENT-SECTOR	40 00				X			163,850	0	12,114
CAROL ROTHMAN TNG-CWA SECY-TREAS	40 00				X			143,221	0	19,703
MARY O'MELVENY GENERAL COUNSEL	40 00				X			185,957	0	20,054
PETER MITCHELL MANAGING GENERAL COUNSEL	40 00				X			174,652	0	19,958
GEORGE KOHL SR DIR - COLLECTIVE BARG	40 00					X		150,932	0	19,842
EDWARD SABOL SR DIR - ORGANIZING	40 00					X		154,072	0	19,827
YVETTE HERRERA SR DIR-EDUCATION COMMUNITY	40 00					X		154,637	0	19,827
THERESSA PLUTA ASST TO SECY-TREAS	40 00					X		144,762	0	19,703
GAIL GANNON SR DIR - FINANCE	40 00					X		157,564	0	13,671
JOHN CLARK FORMER NABET PRESIDENT	40 00						X	50,323	0	1,551