



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493320075936

Form 990

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015, and ending 12-31-2015

B Check if applicable

☒ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite

1130 CONNECTICUT AVENUE NW NO 800

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

WASHINGTON, DC 20036

F Name and address of principal officer

JOHN SWEENEY

1130 CONNECTICUT AVENUE NW NO 800

WASHINGTON,DC 20036

H(a) Is this a group return for subordinates?

No

☐ Yes

☒

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☐ 501(c)(3)

☒ 501(c) ( 5 ) ◀(insert no )

☐ 4947(a)(1) or

☐ 527

J Website: ▶

SOLIDARITYCENTER.ORG

K Form of organization

☒ Corporation

☐ Trust

☐ Association

☐ Other ▶

L Year of formation

1997

M State of legal domicile

DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities

THE SOLIDARITY CENTER'S MISSION IS TO HELP BUILD A GLOBAL LABOR MOVEMENT BY STRENGTHENING THE ECONOMIC AND POLITICAL POWER OF WORKERS AROUND THE WORLD THROUGH EFFECTIVE, INDEPENDENT AND DEMOCRATIC UNIONS

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

|    |                                                                               |    |     |
|----|-------------------------------------------------------------------------------|----|-----|
| 3  | Number of voting members of the governing body (Part VI, line 1a)             | 3  | 9   |
| 4  | Number of independent voting members of the governing body (Part VI, line 1b) | 4  | 6   |
| 5  | Total number of individuals employed in calendar year 2015 (Part V, line 2a)  | 5  | 132 |
| 6  | Total number of volunteers (estimate if necessary)                            | 6  | 0   |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12          | 7a | 0   |
| b  | Net unrelated business taxable income from Form 990-T, line 34                | 7b | 0   |

Revenue

|    |                                                                                  |            |              |
|----|----------------------------------------------------------------------------------|------------|--------------|
| 8  | Contributions and grants (Part VIII, line 1h)                                    | Prior Year | Current Year |
| 9  | Program service revenue (Part VIII, line 2g)                                     | 31,771,181 | 29,998,228   |
| 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d )                   | 0          | 0            |
| 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         | 40,598     | 114,242      |
| 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 13,935     | 2,589        |
|    |                                                                                  | 31,825,714 | 30,115,059   |

Expenses

|     |                                                                                   |            |            |
|-----|-----------------------------------------------------------------------------------|------------|------------|
| 13  | Grants and similar amounts paid (Part IX, column (A), lines 1–3 )                 | 839,389    | 1,498,091  |
| 14  | Benefits paid to or for members (Part IX, column (A), line 4 )                    | 0          | 0          |
| 15  | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 19,454,555 | 18,532,765 |
| 16a | Professional fundraising fees (Part IX, column (A), line 11e)                     | 0          | 0          |
| b   | Total fundraising expenses (Part IX, column (D), line 25) ▶0                      |            |            |
| 17  | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)                      | 12,098,688 | 10,766,264 |
| 18  | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)          | 32,392,632 | 30,797,120 |
| 19  | Revenue less expenses Subtract line 18 from line 12                               | -566,918   | -682,061   |

Net Assets or Fund Balances

|    |                                                           |                           |             |
|----|-----------------------------------------------------------|---------------------------|-------------|
| 20 | Total assets (Part X, line 16)                            | Beginning of Current Year | End of Year |
| 21 | Total liabilities (Part X, line 26)                       | 10,299,029                | 9,617,669   |
| 22 | Net assets or fund balances Subtract line 21 from line 20 | 11,930,740                | 10,719,879  |
|    |                                                           | -1,631,711                | -1,102,210  |

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2016-11-15

Date

SHAWNA BADER-BLAU EXECUTIVE DIRECTOR

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

JOANN WOODSON CPA

Preparer's signature

JOANN WOODSON CPA

Date

Check ☐ if self-employed

PTIN P01293745

Firm's name ▶ CALIBRE CPA GROUP PLLC

Firm's EIN ▶ 47-0900880

Firm's address ▶ 7501 WISCONSIN AVENUE SUITE 1200

WEST BETHESDA, MD 20814

Phone no (202) 331-9880

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form990(2015)

**Part III**

Statement of Program Service Accomplishments

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

☒

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

THE SOLIDARITY CENTER'S MISSION IS TO HELP BUILD A GLOBAL LABOR MOVEMENT BY STRENGTHENING THE ECONOMIC AND POLITICAL POWER OF WORKERS AROUND THE WORLD THROUGH EFFECTIVE, INDEPENDENT AND DEMOCRATIC UNIONS

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

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . .

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS

**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

CONDUCTED EDUCATIONAL AND CULTURAL EXCHANGE PROGRAMS DESIGNED TO BRING SELECTED VISITORS TO THE U S TO OBSERVE, INTERACT, AND CONSULT WITH SPECIALISTS ON LABOR ISSUES

**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

SUPPORTED FREE TRADE UNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING DEMOCRACIES

See Additional Data

**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 . . . . .                                                                                                                                                                                                                                                               | 1   | No  |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?                                                                                                                                                                                                                      | 2   | Yes |
| 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 . . . . .                                                                                                                                                                                                            | 3   | No  |
| 4 Section 501(c)(3) organizations.<br>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 . . . . .                                                                                                                                                                                                 | 4   |     |
| 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 . . . . .                                                                                                                                                                     | 5   | No  |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I                                                                   | 6   | No  |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II                                                                                                         | 7   | No  |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III                                                                                                                                                                        | 8   | No  |
| 9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV                            | 9   | No  |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V                                                                                                                    | 10  | 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                                                                                                                                                                                      | 11a | 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                                                                                                                    | 11b | No  |
| c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII                                                                                                                    | 11c | 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                                                                                                                                   | 11d | Yes |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X                                                                                                                                                                                                   | 11e | 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                                                                         | 11f | Yes |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII                                                                                                                                                                     | 12a | No  |
| 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 and XII is optional                                                                                      | 12b | Yes |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E                                                                                                                                                                                                                                                                                                        | 13  | No  |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .                                                                                                                                                                                                                                                                                                   | 14a | Yes |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .  | 14b | Yes |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . .                                                                                                              | 15  | Yes |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . . .                                                                                                      | 16  | 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) . . . . .                                                                                                                                                                                  | 17  | 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 . . . . .                                                                                                                                                                                                                 | 18  | 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 . . . . .                                                                                                                                                                                                                                           | 19  | No  |
| 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .                                                                                                                                                                                                                                                                                                   | 20a | No  |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?                                                                                                                                                                                                                                                                                              | 20b |     |

**Part IV** Checklist of Required Schedules *(continued)*

|            |                                                                                                                                                                                                                                                                                                                                                           |            |     |    |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----|----|
| <b>21</b>  | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .                                          | <b>21</b>  | Yes |    |
| <b>22</b>  | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .                                                             | <b>22</b>  |     | No |
| <b>23</b>  | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .  | <b>23</b>  | Yes |    |
| <b>24a</b> | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .                                                           | <b>24a</b> |     | No |
| <b>b</b>   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .                                                                                                                                                                                                                                                 | <b>24b</b> |     |    |
| <b>c</b>   | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .                                                                                                                                                                                                      | <b>24c</b> |     |    |
| <b>d</b>   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .                                                                                                                                                                                                                                           | <b>24d</b> |     |    |
| <b>25a</b> | <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b><br>Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .                                                                                                                     | <b>25a</b> |     |    |
| <b>b</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> . . . . .                                                                      | <b>25b</b> |     |    |
| <b>26</b>  | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .                                                                | <b>26</b>  |     | No |
| <b>27</b>  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .                                | <b>27</b>  |     | No |
| <b>28</b>  | 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)                                                                                                                                                              |            |     |    |
| <b>a</b>   | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .                                                                                                                                                                                                                                  | <b>28a</b> |     | No |
| <b>b</b>   | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .                                                                                                                                                                                                               | <b>28b</b> |     | No |
| <b>c</b>   | 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> . . . .                                                                                                                     | <b>28c</b> |     | No |
| <b>29</b>  | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . .                                                                                                                                                                                                                                   | <b>29</b>  |     | No |
| <b>30</b>  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .                                                                                                                                                                 | <b>30</b>  |     | No |
| <b>31</b>  | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .                                                                                                                                                                                                                       | <b>31</b>  |     | No |
| <b>32</b>  | 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> . . . . .                                                                                                                                                                                                     | <b>32</b>  |     | No |
| <b>33</b>  | 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> . . . . .                                                                | <b>33</b>  |     | No |
| <b>34</b>  | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .                                                                                                            | <b>34</b>  | Yes |    |
| <b>35a</b> | Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                                                                                                                                                                                                                                                   | <b>35a</b> | Yes |    |
| <b>b</b>   | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .                                   | <b>35b</b> |     | No |
| <b>36</b>  | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .                                                                                                                                                          | <b>36</b>  |     |    |
| <b>37</b>  | 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>                                 | <b>37</b>  |     | No |
| <b>38</b>  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .                                                                                                                                                             | <b>38</b>  | Yes |    |

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

Yes

No

|     |                                                                                                                                                                                                                                                                                   |     |     |     |     |    |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|-----|-----|----|
| 1a  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .                                                                                                                                                                                            | 1a  | 35  |     | Yes | No |
| b   | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .                                                                                                                                                                                         | 1b  | 0   |     |     |    |
| c   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .                                                                                                                | 1c  |     | Yes |     |    |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .                                                                                           | 2a  | 132 |     |     |    |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . . .                                         | 2b  |     | Yes |     |    |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .                                                                                                                                                                           | 3a  |     |     |     | No |
| b   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . . .                                                                                                                                                             | 3b  |     |     |     |    |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .                              | 4a  |     | Yes |     |    |
| b   | AG, BG, BR, CB, CO, GG, GT, ID, KE, KG, MO, NI<br>If "Yes," enter the name of the foreign country: PK, PE, QA, SF, CE, TH, UP, ZI, DR, MX, OC, LE<br>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) . . . . . |     |     |     |     |    |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .                                                                                                                                                                   | 5a  |     |     |     | No |
| b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .                                                                                                                                                        | 5b  |     |     |     | No |
| c   | If "Yes," to 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 as charitable contributions? . . . . .                                                                 | 6a  |     | Yes |     |    |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .                                                                                                                           | 6b  |     | Yes |     |    |
| 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.<br>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .                                                                              | 8   |     |     |     |    |
| 9a  | Did the sponsoring organization make any taxable distributions under section 4966? . . . . .                                                                                                                                                                                      | 9a  |     |     |     |    |
| b   | Did the sponsoring 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? <b>Note.</b> 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? . . . . .                                                                                                                                                                              | 14a |     |     |     | No |
| 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 or note to any line in this Part VI ☒

**Section A. Governing Body and Management**

|           |                                                                                                                                                                                                                                                                                                         | Yes       | No  |
|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----|
| <b>1a</b> | Enter the number of voting members of the governing body at the end of the tax year<br>If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O | 9         |     |
| <b>1b</b> | Enter the number of voting members included in line 1a, above, who are independent                                                                                                                                                                                                                      | 6         |     |
| <b>2</b>  | 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?                                                                                                                                   | <b>2</b>  | No  |
| <b>3</b>  | 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?                                                                                     | <b>3</b>  | No  |
| <b>4</b>  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?                                                                                                                                                                                        | <b>4</b>  | No  |
| <b>5</b>  | Did the organization become aware during the year of a significant diversion of the organization's assets?                                                                                                                                                                                              | <b>5</b>  | No  |
| <b>6</b>  | Did the organization have members or stockholders?                                                                                                                                                                                                                                                      | <b>6</b>  | No  |
| <b>7a</b> | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?                                                                                                                                                      | <b>7a</b> | No  |
| <b>b</b>  | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?                                                                                                                                               | <b>7b</b> | No  |
| <b>8</b>  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following                                                                                                                                                                        |           |     |
| <b>a</b>  | The governing body?                                                                                                                                                                                                                                                                                     | <b>8a</b> | Yes |
| <b>b</b>  | Each committee with authority to act on behalf of the governing body?                                                                                                                                                                                                                                   | <b>8b</b> | Yes |
| <b>9</b>  | 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                                                                                            | <b>9</b>  | No  |

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

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

**Section C. Disclosure**

**17** List the States with which a copy of this Form 990 is required to be filed ►

**18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

**20** State the name, address, and telephone number of the person who possesses the organization's books and records  
 ► SOLIDARITY CENTER - LYSTIA SANTOSA 1130 CONNECTICUT AVENUE NW SUITE WASHINGTON, DC 20036 (202) 974-8323

Part VII

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

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

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

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

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

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

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

| (A)<br>Name and Title                                    | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|----------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                                          |                                                                                            | Individual trustee or director                                                                            | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| (1) JOHN SWEENEY<br>.....<br>PRESIDENT EMERTIUS          | 2 00<br>.....<br>2 00                                                                      | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 10,442                                                                    | 18,046                                                                                        |
| (2) ELIZABETH SHULER<br>.....<br>SECRETARY - TREASURER   | 2 00<br>.....<br>42 00                                                                     | X                                                                                                         |                       | X       |              |                              |        | 0                                                                    | 244,575                                                                   | 88,225                                                                                        |
| (3) RICHARD TRUMKA<br>.....<br>CHAIR                     | 2 00<br>.....<br>42 00                                                                     | X                                                                                                         |                       | X       |              |                              |        | 0                                                                    | 287,443                                                                   | 96,946                                                                                        |
| (4) TEFERE GEBRE<br>.....<br>VICE CHAIR                  | 2 00<br>.....<br>42 00                                                                     | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 240,983                                                                   | 87,938                                                                                        |
| (5) R THOMAS BUFFENBARGER<br>.....<br>TRUSTEE            | 2 00<br>.....<br>2 00                                                                      | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (6) LARRY COHEN<br>.....<br>TRUSTEE                      | 2 00<br>.....<br>2 00                                                                      | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (7) LEO GERARD<br>.....<br>TRUSTEE                       | 2 00<br>.....<br>2 00                                                                      | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (8) ART PULASKI<br>.....<br>TRUSTEE                      | 2 00<br>.....<br>42 00                                                                     | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (9) JOSLYN N WILLIAMS<br>.....<br>TRUSTEE                | 2 00<br>.....<br>2 00                                                                      | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (10) SHAWNA BADER BLAU<br>.....<br>EXECUTIVE DIRECTOR    | 40 00<br>.....<br>2 00                                                                     |                                                                                                           |                       | X       |              |                              |        | 147,838                                                              | 0                                                                         | 77,039                                                                                        |
| (11) LYSTIA SANTOSA<br>.....<br>DIRECTOR OF FINANCE      | 40 00<br>.....<br>2 00                                                                     |                                                                                                           |                       | X       |              |                              |        | 125,140                                                              | 0                                                                         | 71,427                                                                                        |
| (12) KATHLEEN DOHERTY<br>.....<br>DEPUTY DIRECTOR ED     | 40 00<br>.....                                                                             |                                                                                                           |                       | X       |              |                              |        | 135,896                                                              | 0                                                                         | 60,398                                                                                        |
| (13) HANAD MOHAMMAD<br>.....<br>COUNTRY PROGRAM DIRECTOR | 35 00<br>.....                                                                             |                                                                                                           |                       |         |              | X                            |        | 233,802                                                              | 0                                                                         | 49,367                                                                                        |
| (14) RICHARD HALL<br>.....<br>COUNTRY PROGRAM DIRECTOR   | 35 00<br>.....                                                                             |                                                                                                           |                       |         |              | X                            |        | 149,901                                                              | 0                                                                         | 47,205                                                                                        |

Part VII

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

| (A)<br>Name and Title                                      | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W- 2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W- 2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|-----------------------------------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                                            |                                                                                            | Individual trustee or director                                                                            | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |                                                                       |                                                                            |                                                                                               |
| (15) ROBERT PAJKOVSKI<br>.....<br>COUNTRY PROGRAM DIRECTOR | 35 00<br>.....                                                                             |                                                                                                           |                       |         |              | X                            |        | 158,742                                                               | 0                                                                          | 49,245                                                                                        |
| (16) ALONZO SUSON<br>.....<br>COUNTRY PROGRAM DIRECTOR     | 35 00<br>.....                                                                             |                                                                                                           |                       |         |              | X                            |        | 182,536                                                               | 0                                                                          | 49,271                                                                                        |
| (17) GEOFFREY HERZOGS<br>.....<br>COUNTRY PROGRAM DIRECTOR | 35 00<br>.....                                                                             |                                                                                                           |                       |         |              | X                            |        | 161,458                                                               | 0                                                                          | 39,778                                                                                        |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |
|                                                            |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                       |                                                                            |                                                                                               |

|                                                                   |   |           |         |         |
|-------------------------------------------------------------------|---|-----------|---------|---------|
| 1b Sub-Total . . . . .                                            | ▶ |           |         |         |
| c Total from continuation sheets to Part VII, Section A . . . . . | ▶ |           |         |         |
| d Total (add lines 1b and 1c) . . . . .                           | ▶ | 1,295,313 | 783,443 | 734,885 |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 8

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* . . . . .

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? *If "Yes," complete Schedule J for such individual* . . . . .

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? *If "Yes," complete Schedule J for such person* . . . . .

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 Report compensation for the calendar year ending with or within the organization's tax year

| (A)<br>Name and business address                                               | (B)<br>Description of services           | (C)<br>Compensation |
|--------------------------------------------------------------------------------|------------------------------------------|---------------------|
| SOCIAL IMPACT INC<br><br>2300 CLARENDON BLVD SUITE 1000<br>ARLINGTON, VA 22201 | DESIGN AND FACILITATE THE IMPLEMENTATION | 119,462             |
|                                                                                |                                          |                     |
|                                                                                |                                          |                     |
|                                                                                |                                          |                     |
|                                                                                |                                          |                     |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 1

Form 990 (2015)

Part VIII

Statement of Revenue

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

|                                                           |                                           |                                                                                                                                   |                                                    | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections<br>512-514 |  |
|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|----------------------|----------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------|--|
| Contributions, Gifts, Grants<br>and Other Similar Amounts | 1a                                        | Federated campaigns . . .                                                                                                         | 1a                                                 |                      |                                                    |                                         |                                                                     |  |
|                                                           | b                                         | Membership dues . . . . .                                                                                                         | 1b                                                 |                      |                                                    |                                         |                                                                     |  |
|                                                           | c                                         | Fundraising events . . . . .                                                                                                      | 1c                                                 |                      |                                                    |                                         |                                                                     |  |
|                                                           | d                                         | Related organizations . . . . .                                                                                                   | 1d                                                 | 300,000              |                                                    |                                         |                                                                     |  |
|                                                           | e                                         | Government grants (contributions)                                                                                                 | 1e                                                 | 29,698,228           |                                                    |                                         |                                                                     |  |
|                                                           | f                                         | All other contributions, gifts, grants, and<br>similar amounts not included above                                                 | 1f                                                 |                      |                                                    |                                         |                                                                     |  |
|                                                           | g                                         | Noncash contributions included in lines<br>1a-1f \$                                                                               |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | h                                         | Total. Add lines 1a-1f . . . . .                                                                                                  |                                                    | 29,998,228           |                                                    |                                         |                                                                     |  |
| Program Service Revenue                                   |                                           |                                                                                                                                   | Business Code                                      |                      |                                                    |                                         |                                                                     |  |
|                                                           | 2a                                        |                                                                                                                                   |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | b                                         |                                                                                                                                   |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | c                                         |                                                                                                                                   |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | d                                         |                                                                                                                                   |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | e                                         |                                                                                                                                   |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | f                                         | All other program service revenue                                                                                                 |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | g                                         | Total. Add lines 2a-2f . . . . .                                                                                                  |                                                    |                      |                                                    |                                         |                                                                     |  |
| Other Revenue                                             | 3                                         | Investment income (including dividends, interest,<br>and other similar amounts) . . . . .                                         |                                                    | 114,510              |                                                    |                                         | 114,510                                                             |  |
|                                                           | 4                                         | Income from investment of tax-exempt bond proceeds . . .                                                                          |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | 5                                         | Royalties . . . . .                                                                                                               |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | 6a                                        | (i) Real                                                                                                                          |                                                    | (ii) Personal        |                                                    |                                         |                                                                     |  |
|                                                           |                                           | Gross rents                                                                                                                       |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           |                                           | b                                                                                                                                 | Less rental expenses                               |                      |                                                    |                                         |                                                                     |  |
|                                                           |                                           | c                                                                                                                                 | Rental income or (loss)                            |                      |                                                    |                                         |                                                                     |  |
|                                                           | d                                         | Net rental income or (loss) . . . . .                                                                                             |                                                    |                      |                                                    |                                         |                                                                     |  |
|                                                           | 7a                                        | (i) Securities                                                                                                                    |                                                    | (ii) Other           |                                                    |                                         |                                                                     |  |
|                                                           |                                           | Gross amount from sales of assets other than inventory                                                                            |                                                    | 3,547,738            |                                                    |                                         |                                                                     |  |
|                                                           |                                           | b                                                                                                                                 | Less cost or other basis and sales expenses        | 3,548,006            |                                                    |                                         |                                                                     |  |
|                                                           |                                           | c                                                                                                                                 | Gain or (loss)                                     | -268                 |                                                    |                                         |                                                                     |  |
|                                                           | d                                         | Net gain or (loss) . . . . .                                                                                                      |                                                    | -268                 |                                                    |                                         | -268                                                                |  |
|                                                           | 8a                                        | Gross income from fundraising events (not including<br>\$ of contributions reported on line 1c)<br>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<br>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                                                       | OTHER INCOME                              |                                                                                                                                   | 900099                                             | 2,589                |                                                    |                                         | 2,589                                                               |  |
| b                                                         |                                           |                                                                                                                                   |                                                    |                      |                                                    |                                         |                                                                     |  |
| c                                                         |                                           |                                                                                                                                   |                                                    |                      |                                                    |                                         |                                                                     |  |
| d                                                         | All other revenue . . . . .               |                                                                                                                                   |                                                    |                      |                                                    |                                         |                                                                     |  |
| e                                                         | Total. Add lines 11a-11d . . . . .        |                                                                                                                                   |                                                    | 2,589                |                                                    |                                         |                                                                     |  |
| 12                                                        | Total revenue. See Instructions . . . . . |                                                                                                                                   |                                                    | 30,115,059           | 0                                                  | 0                                       | 116,831                                                             |  |

**Part IX** Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. |                                                                                                                                                                                                                                                | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1                                                                              | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.                                                                                                                                          | 103,622               |                                 |                                        |                             |
| 2                                                                              | Grants and other assistance to domestic individuals. See Part IV, line 22.                                                                                                                                                                     |                       |                                 |                                        |                             |
| 3                                                                              | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.                                                                                                              | 1,394,469             |                                 |                                        |                             |
| 4                                                                              | Benefits paid to or for members.                                                                                                                                                                                                               |                       |                                 |                                        |                             |
| 5                                                                              | Compensation of current officers, directors, trustees, and key employees.                                                                                                                                                                      | 617,737               |                                 |                                        |                             |
| 6                                                                              | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).                                                                                                 |                       |                                 |                                        |                             |
| 7                                                                              | Other salaries and wages.                                                                                                                                                                                                                      | 10,760,517            |                                 |                                        |                             |
| 8                                                                              | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).                                                                                                                                            | 1,954,915             |                                 |                                        |                             |
| 9                                                                              | Other employee benefits.                                                                                                                                                                                                                       | 4,521,740             |                                 |                                        |                             |
| 10                                                                             | Payroll taxes.                                                                                                                                                                                                                                 | 677,856               |                                 |                                        |                             |
| 11                                                                             | Fees for services (non-employees):                                                                                                                                                                                                             |                       |                                 |                                        |                             |
| a                                                                              | Management.                                                                                                                                                                                                                                    |                       |                                 |                                        |                             |
| b                                                                              | Legal.                                                                                                                                                                                                                                         | 214,386               |                                 |                                        |                             |
| c                                                                              | Accounting.                                                                                                                                                                                                                                    | 182,711               |                                 |                                        |                             |
| d                                                                              | Lobbying.                                                                                                                                                                                                                                      |                       |                                 |                                        |                             |
| e                                                                              | Professional fundraising services. See Part IV, line 17.                                                                                                                                                                                       |                       |                                 |                                        |                             |
| f                                                                              | Investment management fees.                                                                                                                                                                                                                    |                       |                                 |                                        |                             |
| g                                                                              | Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)                                                                                                                                   | 2,518,245             |                                 |                                        |                             |
| 12                                                                             | Advertising and promotion.                                                                                                                                                                                                                     | 18,197                |                                 |                                        |                             |
| 13                                                                             | Office expenses.                                                                                                                                                                                                                               | 1,293,854             |                                 |                                        |                             |
| 14                                                                             | Information technology.                                                                                                                                                                                                                        | 69,267                |                                 |                                        |                             |
| 15                                                                             | Royalties.                                                                                                                                                                                                                                     |                       |                                 |                                        |                             |
| 16                                                                             | Occupancy.                                                                                                                                                                                                                                     | 1,967,225             |                                 |                                        |                             |
| 17                                                                             | Travel.                                                                                                                                                                                                                                        | 3,422,207             |                                 |                                        |                             |
| 18                                                                             | Payments of travel or entertainment expenses for any federal, state, or local public officials.                                                                                                                                                |                       |                                 |                                        |                             |
| 19                                                                             | Conferences, conventions, and meetings.                                                                                                                                                                                                        | 542,310               |                                 |                                        |                             |
| 20                                                                             | Interest.                                                                                                                                                                                                                                      |                       |                                 |                                        |                             |
| 21                                                                             | Payments to affiliates.                                                                                                                                                                                                                        |                       |                                 |                                        |                             |
| 22                                                                             | Depreciation, depletion, and amortization.                                                                                                                                                                                                     | 17,409                |                                 |                                        |                             |
| 23                                                                             | Insurance.                                                                                                                                                                                                                                     | 166,071               |                                 |                                        |                             |
| 24                                                                             | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)                                             |                       |                                 |                                        |                             |
| a                                                                              | OTHER                                                                                                                                                                                                                                          | 184,431               |                                 |                                        |                             |
| b                                                                              | TEMPORARY PERSONNEL                                                                                                                                                                                                                            | 169,951               |                                 |                                        |                             |
| c                                                                              |                                                                                                                                                                                                                                                |                       |                                 |                                        |                             |
| d                                                                              |                                                                                                                                                                                                                                                |                       |                                 |                                        |                             |
| e                                                                              | All other expenses                                                                                                                                                                                                                             |                       |                                 |                                        |                             |
| 25                                                                             | <b>Total functional expenses.</b> Add lines 1 through 24e.                                                                                                                                                                                     | 30,797,120            |                                 |                                        |                             |
| 26                                                                             | <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). |                       |                                 |                                        |                             |

Part X

Balance Sheet

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

☐

|                             |                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                |            | (A)               |     | (B)         |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------|-----|-------------|
|                             |                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                |            | Beginning of year |     | End of year |
| Assets                      | 1                                                                                                                                                                 | Cash—non-interest-bearing                                                                                                                                                                                                                                                                                                      |            | 1,330,453         | 1   | 2,347,679   |
|                             | 2                                                                                                                                                                 | Savings and temporary cash investments                                                                                                                                                                                                                                                                                         |            | 118,496           | 2   | 118,639     |
|                             | 3                                                                                                                                                                 | Pledges and grants receivable, net                                                                                                                                                                                                                                                                                             |            | 1,650,134         | 3   | 636,192     |
|                             | 4                                                                                                                                                                 | Accounts receivable, net                                                                                                                                                                                                                                                                                                       |            | 52,238            | 4   | 44,184      |
|                             | 5                                                                                                                                                                 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.                                                                                                                                                           |            |                   | 5   |             |
|                             | 6                                                                                                                                                                 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. |            |                   | 6   |             |
|                             | 7                                                                                                                                                                 | Notes and loans receivable, net                                                                                                                                                                                                                                                                                                |            |                   | 7   |             |
|                             | 8                                                                                                                                                                 | Inventories for sale or use                                                                                                                                                                                                                                                                                                    |            |                   | 8   |             |
|                             | 9                                                                                                                                                                 | Prepaid expenses and deferred charges                                                                                                                                                                                                                                                                                          |            | 548,849           | 9   | 844,448     |
|                             | 10a                                                                                                                                                               | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.                                                                                                                                                                                                                                           | 10a580,623 |                   |     |             |
|                             | b                                                                                                                                                                 | Less: accumulated depreciation                                                                                                                                                                                                                                                                                                 | 10b527,972 | 12,987            | 10c | 52,651      |
|                             | 11                                                                                                                                                                | Investments—publicly traded securities                                                                                                                                                                                                                                                                                         |            | 5,494,114         | 11  | 4,983,804   |
|                             | 12                                                                                                                                                                | Investments—other securities. See Part IV, line 11.                                                                                                                                                                                                                                                                            |            |                   | 12  |             |
|                             | 13                                                                                                                                                                | Investments—program-related. See Part IV, line 11.                                                                                                                                                                                                                                                                             |            |                   | 13  |             |
|                             | 14                                                                                                                                                                | Intangible assets                                                                                                                                                                                                                                                                                                              |            |                   | 14  |             |
|                             | 15                                                                                                                                                                | Other assets. See Part IV, line 11.                                                                                                                                                                                                                                                                                            |            | 1,091,758         | 15  | 590,072     |
|                             | 16                                                                                                                                                                | <b>Total assets.</b> Add lines 1 through 15 (must equal line 34).                                                                                                                                                                                                                                                              |            | 10,299,029        | 16  | 9,617,669   |
| Liabilities                 | 17                                                                                                                                                                | Accounts payable and accrued expenses                                                                                                                                                                                                                                                                                          |            | 11,749,107        | 17  | 10,676,232  |
|                             | 18                                                                                                                                                                | Grants payable                                                                                                                                                                                                                                                                                                                 |            |                   | 18  |             |
|                             | 19                                                                                                                                                                | Deferred revenue                                                                                                                                                                                                                                                                                                               |            | 56,384            | 19  | 46,044      |
|                             | 20                                                                                                                                                                | Tax-exempt bond liabilities                                                                                                                                                                                                                                                                                                    |            |                   | 20  |             |
|                             | 21                                                                                                                                                                | Escrow or custodial account liability. Complete Part IV of Schedule D.                                                                                                                                                                                                                                                         |            |                   | 21  |             |
|                             | 22                                                                                                                                                                | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.                                                                                                                                          |            |                   | 22  |             |
|                             | 23                                                                                                                                                                | Secured mortgages and notes payable to unrelated third parties                                                                                                                                                                                                                                                                 |            |                   | 23  |             |
|                             | 24                                                                                                                                                                | Unsecured notes and loans payable to unrelated third parties                                                                                                                                                                                                                                                                   |            |                   | 24  |             |
|                             | 25                                                                                                                                                                | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D.                                                                                                                                                         |            | 125,249           | 25  | -2,397      |
|                             | 26                                                                                                                                                                | <b>Total liabilities.</b> Add lines 17 through 25.                                                                                                                                                                                                                                                                             |            | 11,930,740        | 26  | 10,719,879  |
| Net Assets or Fund Balances | <b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b> |                                                                                                                                                                                                                                                                                                                                |            |                   |     |             |
|                             | 27                                                                                                                                                                | Unrestricted net assets                                                                                                                                                                                                                                                                                                        |            | -1,631,711        | 27  | -1,102,210  |
|                             | 28                                                                                                                                                                | Temporarily restricted net assets                                                                                                                                                                                                                                                                                              |            |                   | 28  |             |
|                             | 29                                                                                                                                                                | Permanently restricted net assets                                                                                                                                                                                                                                                                                              |            |                   | 29  |             |
|                             | <b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>                          |                                                                                                                                                                                                                                                                                                                                |            |                   |     |             |
|                             | 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                                                                                                                                                                | <b>Total net assets or fund balances</b>                                                                                                                                                                                                                                                                                       |            | -1,631,711        | 33  | -1,102,210  |
|                             | 34                                                                                                                                                                | <b>Total liabilities and net assets/fund balances</b>                                                                                                                                                                                                                                                                          |            | 10,299,029        | 34  | 9,617,669   |

**Part XI**   **Reconciliation of Net Assets**

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

|           |                                                                                                               |           |            |
|-----------|---------------------------------------------------------------------------------------------------------------|-----------|------------|
| <b>1</b>  | Total revenue (must equal Part VIII, column (A), line 12) . . . . .                                           | <b>1</b>  | 30,115,059 |
| <b>2</b>  | Total expenses (must equal Part IX, column (A), line 25) . . . . .                                            | <b>2</b>  | 30,797,120 |
| <b>3</b>  | Revenue less expenses Subtract line 2 from line 1 . . . . .                                                   | <b>3</b>  | -682,061   |
| <b>4</b>  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .                 | <b>4</b>  | -1,631,711 |
| <b>5</b>  | Net unrealized gains (losses) on investments . . . . .                                                        | <b>5</b>  | -194,410   |
| <b>6</b>  | Donated services and use of facilities . . . . .                                                              | <b>6</b>  |            |
| <b>7</b>  | Investment expenses . . . . .                                                                                 | <b>7</b>  |            |
| <b>8</b>  | Prior period adjustments . . . . .                                                                            | <b>8</b>  |            |
| <b>9</b>  | Other changes in net assets or fund balances (explain in Schedule O) . . . . .                                | <b>9</b>  | 1,405,972  |
| <b>10</b> | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | <b>10</b> | -1,102,210 |

**Part XII**   **Financial Statements and Reporting**

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

|           |                                                                                                                                                                                                                                                                                                                                                                                                                          | Yes | No |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1</b>  | Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O                                                                                                                                        |     |    |
| <b>2a</b> | Were the organization's financial statements compiled or reviewed by an independent accountant?<br>If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis |     | No |
| <b>b</b>  | Were the organization's financial statements audited by an independent accountant?<br>If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both<br><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                | Yes |    |
| <b>c</b>  | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?<br>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O                                                                    | Yes |    |
| <b>3a</b> | 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?                                                                                                                                                                                                                                                                 | Yes |    |
| <b>b</b>  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits                                                                                                                                                                                                     | Yes |    |

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 52-1984713  
**Name:** AMERICAN CENTER FOR INTERNATIONAL LABOR  
SOLIDARITY

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

|                                                                                                                                                                                                   |                |                        |               |   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------|---------------|---|
| (Code                                                                                                                                                                                             | ) (Expenses \$ | including grants of \$ | ) (Revenue \$ | ) |
| PROMOTED WORKERS RIGHTS OVERSEAS INCLUDING THE PROTECTION OF CHILDREN FROM EXPLOITATION PROMOTED<br>FREEDOM OF ASSOCIATION, COLLECTIVE BARGAINING AND OTHER WORKER RIGHTS IN EMERGING DEMOCRACIES |                |                        |               |   |

|                                                                                   |                                              |
|-----------------------------------------------------------------------------------|----------------------------------------------|
| Name of the organization<br>AMERICAN CENTER FOR INTERNATIONAL LABOR<br>SOLIDARITY | Employer identification number<br>52-1984713 |
|-----------------------------------------------------------------------------------|----------------------------------------------|

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

|   |                                                                                                                                                                                                                                                                                                                                         |                              |
|---|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
|   | (a) Donor advised funds                                                                                                                                                                                                                                                                                                                 | (b) Funds and other accounts |
| 1 | Total number at end of year                                                                                                                                                                                                                                                                                                             |                              |
| 2 | Aggregate value of contributions to (during year)                                                                                                                                                                                                                                                                                       |                              |
| 3 | Aggregate value of grants from (during year)                                                                                                                                                                                                                                                                                            |                              |
| 4 | Aggregate value at end of year                                                                                                                                                                                                                                                                                                          |                              |
| 5 | Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>                                                            |                              |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> |                              |

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                             |
|---|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 1 | Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education)<div><input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space</div><input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Preservation of a certified historic structure</div> |                             |
| 2 | Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year                                                                                                                                                                                                                                                                                                    |                             |
| a | Total number of conservation easements                                                                                                                                                                                                                                                                                                                                                                                                                                | Held at the End of the Year |
| b | Total acreage restricted by conservation easements                                                                                                                                                                                                                                                                                                                                                                                                                    | 2a                          |
| c | Number of conservation easements on a certified historic structure included in (a)                                                                                                                                                                                                                                                                                                                                                                                    | 2b                          |
| d | Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register                                                                                                                                                                                                                                                                                                                              | 2c                          |
| 3 | Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►                                                                                                                                                                                                                                                                                                                               | 2d                          |
| 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>                                                                                                                                                                                                                        |                             |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year<br>►                                                                                                                                                                                                                                                                                                                        |                             |
| 7 | Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year<br>► \$                                                                                                                                                                                                                                                                                                                           |                             |
| 8 | Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>                                                                                                                                                                                                                                                     |                             |
| 9 | In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements                                                                                                                                                           |                             |

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

|      |                                                                                                                                                                                                                                                                                                                                                                                      |      |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| 1a   | If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items |      |
| b    | If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items                                                      |      |
| (i)  | Revenue included on Form 990, Part VIII, line 1                                                                                                                                                                                                                                                                                                                                      | ► \$ |
| (ii) | Assets included in Form 990, Part X                                                                                                                                                                                                                                                                                                                                                  | ► \$ |
| 2    | If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items                                                                                                                                                          |      |
| a    | Revenue included on Form 990, Part VIII, line 1                                                                                                                                                                                                                                                                                                                                      | ► \$ |
| b    | Assets included in Form 990, Part X                                                                                                                                                                                                                                                                                                                                                  | ► \$ |

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

(continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a☐ Public exhibition

b☐ Scholarly research

c☐ Preservation for future generations

d☐ Loan or exchange programs

e☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

|   | Amount                        |
|---|-------------------------------|
| c | Beginning balance             |
| d | Additions during the year     |
| e | Distributions during the year |
| f | Ending balance                |

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V

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

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

2

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

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

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

3a

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

(i)

unrelated organizations

(ii)

related organizations

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

b

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

4

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

Part VI

Land, Buildings, and Equipment.

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

| Description of property                                                                         | (a)<br>Cost or other basis<br>(investment) | (b)<br>Cost or other basis<br>(other) | (c)<br>Accumulated<br>depreciation | (d)<br>Book value |
|-------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------|------------------------------------|-------------------|
| 1a Land                                                                                         |                                            |                                       |                                    |                   |
| b Buildings                                                                                     |                                            |                                       |                                    |                   |
| c Leasehold improvements                                                                        |                                            | 252,346                               | 252,346                            | 0                 |
| d Equipment                                                                                     |                                            | 328,277                               | 275,626                            | 52,651            |
| e Other                                                                                         |                                            |                                       |                                    |                   |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) |                                            |                                       |                                    | 52,651            |



Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

|   |                                                                                         |    |            |
|---|-----------------------------------------------------------------------------------------|----|------------|
| 1 | Total revenue, gains, and other support per audited financial statements . . . . .      | 1  | 31,344,777 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12                      |    |            |
| a | Net unrealized gains (losses) on investments . . . . .                                  | 2a | -194,410   |
| b | Donated services and use of facilities . . . . .                                        | 2b |            |
| c | Recoveries of prior year grants . . . . .                                               | 2c |            |
| d | Other (Describe in Part XIII ) . . . . .                                                | 2d | 1,424,128  |
| e | Add lines 2a through 2d . . . . .                                                       | 2e | 1,229,718  |
| 3 | Subtract line 2e from line 1 . . . . .                                                  | 3  | 30,115,059 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1                     |    |            |
| a | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .              | 4a |            |
| b | Other (Describe in Part XIII ) . . . . .                                                | 4b |            |
| c | Add lines 4a and 4b . . . . .                                                           | 4c | 0          |
| 5 | Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12 ) . . . . . | 5  | 30,115,059 |

Part XII

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

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

|   |                                                                                           |    |            |
|---|-------------------------------------------------------------------------------------------|----|------------|
| 1 | Total expenses and losses per audited financial statements . . . . .                      | 1  | 32,232,322 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25                          |    |            |
| a | Donated services and use of facilities . . . . .                                          | 2a |            |
| b | Prior year adjustments . . . . .                                                          | 2b |            |
| c | Other losses . . . . .                                                                    | 2c |            |
| d | Other (Describe in Part XIII ) . . . . .                                                  | 2d | 1,435,202  |
| e | Add lines 2a through 2d . . . . .                                                         | 2e | 1,435,202  |
| 3 | Subtract line 2e from line 1 . . . . .                                                    | 3  | 30,797,120 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1:                        |    |            |
| a | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .                | 4a |            |
| b | Other (Describe in Part XIII ) . . . . .                                                  | 4b |            |
| c | Add lines 4a and 4b . . . . .                                                             | 4c | 0          |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . . | 5  | 30,797,120 |

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Return Reference | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PART X, LINE 2   | SOLIDARITY CENTER IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(5) OF THE INTERNAL REVENUE CODE, EXCEPT ON NET INCOME, IF ANY, FROM UNRELATED BUSINESS ACTIVITIES. SOLIDARITY CENTER ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC INCOME TAXES. THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE CENTER PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS. AS OF DECEMBER 31, 2015, THE STATUTE OF LIMITATIONS FOR TAX YEARS 2012 THROUGH 2014 REMAINS OPEN WITH THE U.S. FEDERAL JURISDICTION IN WHICH THE CENTER FILES RETURNS. |

**Part XIII**   **Supplemental Information** *(continued)*

| Return Reference                      | Explanation                                                           |
|---------------------------------------|-----------------------------------------------------------------------|
| PART XII, LINE 2D - OTHER ADJUSTMENTS | IN-KIND EXPENSES 1,130,341   EXPENSES OF RELATED ORGANIZATION 304,861 |
|                                       |                                                                       |
|                                       |                                                                       |
|                                       |                                                                       |
|                                       |                                                                       |
|                                       |                                                                       |
|                                       |                                                                       |
|                                       |                                                                       |
|                                       |                                                                       |

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.  
► Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2015

Open to Public  
Inspection

Name of the organization  
AMERICAN CENTER FOR INTERNATIONAL LABOR  
SOLIDARITY

Employer identification number  
52-1984713

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☐ Yes☒ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

| (a) Region                                 | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for and investments in region |
|--------------------------------------------|-------------------------------------|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------|
| ( 1 ) See Add'l Data                       |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| ( 2 )                                      |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| ( 3 )                                      |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| ( 4 )                                      |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| ( 5 )                                      |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| 3a Sub-total                               | 25                                  | 133                                                                    |                                                                                                                                             |                                                                                                    | 16,264,417                                           |
| b Total from continuation sheets to Part I | 0                                   | 0                                                                      |                                                                                                                                             |                                                                                                    | 0                                                    |
| c Totals (add lines 3a and 3b)             | 25                                  | 133                                                                    |                                                                                                                                             |                                                                                                    | 16,264,417                                           |

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1    | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|------|--------------------------|----------------------------------------------|------------|----------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
| (1)  | See Add'l Data           |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (2)  |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (3)  |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (4)  |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (5)  |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (6)  |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (7)  |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (8)  |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (9)  |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (10) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (11) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (12) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (13) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (14) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (15) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (16) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |

2

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

3

Enter total number of other organizations or entities . . . . . ▶

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

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|------------|--------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
| ( 1 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 2 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 3 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 4 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 5 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 6 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 7 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 8 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 9 )                           |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 10 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 11 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 12 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 13 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 14 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 15 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 16 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 17 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |
| ( 18 )                          |            |                          |                          |                                 |                                   |                                        |                                                       |

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)*

☐

Yes

☒

No
- 3

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

☐

Yes

☒

No
- 4

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

☐

Yes

☒

No
- 5

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

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)*

☐

Yes

☒

No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

**990 Schedule F, Supplemental Information**

| Return Reference | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PART I, LINE 2   | <p>SOLIDARITY CENTER HAS MONITORING POLICIES AND PROCEDURES WHICH ARE APPLIED TO ALL OF THE AGREEMENTS THE CENTER ISSUES TO OUR PARTNERS ORGANIZATIONS OVERSEAS. THE AGREEMENTS SPECIFY THE TERMS, THE BUDGET AMOUNT AND PERIOD, THE SCOPE OF WORK, AS WELL AS THE NARRATIVE AND FINANCIAL REPORT REQUIREMENTS ON HOW TO ACCOUNT FOR THE FUNDS GIVEN TO THE PARTNERS ORGANIZATIONS. OUR FIELD OFFICES ARE RESPONSIBLE FOR MONITORING AND OVERSEEING THE PROGRESS AND IMPLEMENTATION OF THE PROGRAM ACTIVITIES CONDUCTED BY THE PARTNERS. ADVANCE FUNDS ARE GIVEN TO THE SUBGRANTEES BY OUR FIELD OFFICES WITH THE TERMS AND CONDITIONS IN WHICH THE SUBGRANTEE MUST COMPLY WITH. ALL DISBURSEMENTS PAID BY THE SUBGRANTEE MUST BE ACCOUNTED FOR AND SUPPORTED BY LEGITIMATE RECEIPTS IN ORDER TO BE ACCEPTED BY THE SOLIDARITY CENTER. THE RECEIPTS ARE BEING AUDITED BY OUR FINANCIAL STAFF IN FIELD OFFICES PRIOR TO SENDING TO SOLIDARITY CENTER'S HEADQUARTERS FOR FINAL REVIEW AND AUDIT.</p> |

## Additional Data

**Software ID:**  
**Software Version:**

**EIN:** 52-1984713

**Name:** AMERICAN CENTER FOR INTERNATIONAL LABOR  
SOLIDARITY

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

| (a) Region                   | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region               | (f) Total expenditures for region |
|------------------------------|-------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| CENTRAL AMERICA              | 3                                   | 8                                           | PROGRAM SERVICES                                                                                                               | CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS | 1,794,385                         |
| EAST ASIA AND THE PACIFIC    | 3                                   | 28                                          | PROGRAM SERVICES                                                                                                               | CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS | 3,311,687                         |
| MIDDLE EAST AND NORTH AFRICA | 4                                   | 10                                          | PROGRAM SERVICES                                                                                                               | CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS | 1,433,635                         |

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

| (a) Region    | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region               | (f) Total expenditures for region |
|---------------|-------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| NORTH AMERICA | 1                                   | 7                                           | PROGRAM SERVICES                                                                                                               | CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS | 657,619                           |
| SOUTH AMERICA | 4                                   | 12                                          | PROGRAM SERVICES                                                                                                               | CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS | 2,039,321                         |
| SOUTH ASIA    | 3                                   | 34                                          | PROGRAM SERVICES                                                                                                               | CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS | 2,543,812                         |

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

| (a) Region                        | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region               | (f) Total expenditures for region |
|-----------------------------------|-------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| SUB-SAHARAN AFRICA                | 4                                   | 21                                          | PROGRAM SERVICES                                                                                                               | CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS | 2,611,450                         |
| RUSSIA & NEWLY INDEPENDENT STATES | 3                                   | 13                                          | PROGRAM SERVICES                                                                                                               | CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS | 1,872,508                         |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region      | (d) Purpose of grant                                                                                                        | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) A mount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|------------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | CENTRAL AMERICA | BUILD AND STRENGTHEN ORGANIZATIONS OF WORKERS WHO ARE DYNAMIC, REPRESENTATIVE, AND SUSTAINABLE                              | 9,223                    | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | BUILD AND STRENGTHEN ORGANIZATIONS OF WORKERS WHO ARE DYNAMIC, REPRESENTATIVE, AND SUSTAINABLE                              | 17,667                   | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | SUPPORT FOR CENTRAL AMERICAN UNIONS IN THE AGRICULTURE SECTOR LIKE BANANA, FRUIT AND VEGETABLES                             | 7,313                    | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | PROMOTE FREEDOM OF ASSOCIATION COLLECTIVE BARGAINING AND COMPLIANCE WITH LABOR STANDARDS IN THE TELECOMMUNICATIONS INDUSTRY | 5,199                    | WIRE TRANSFER                   |                                    |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region      | (d) Purpose of grant                                                                                                                                                                               | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) A mount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|------------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | CENTRAL AMERICA | SUPPORT FOR THE DOCUMENTATION AND REPORTING OF CASES OF VIOLENCE AGAINST TRADE UNIONISTS IN THE COUNTRY                                                                                            | 13,297                   | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | SUPPORT FOR CENTRAL AMERICAN UNIONS IN THE AGRICULTURE SECTOR LIKE BANANA, FRUIT AND VEGETABLES                                                                                                    | 8,319                    | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | PROMOTE LABOR RIGHTS COMPLIANCE BY STRENGTHENING THE ORGANIZATION, REPRESENTATION, AND LEADERSHIP CAPACITIES OF WORKERS AND UNIONS IN THE CAFTA-DR REGION TO EFFECTIVELY ADVOCATE FOR LABOR RIGHTS | 16,548                   | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | BUILD AND STRENGTHEN DYNAMIC, REPRESENTATIVE AND SUSTAINABLE WORKER ORGANIZATIONS                                                                                                                  | 5,860                    | WIRE TRANSFER                   |                                    |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region      | (d) Purpose of grant                                                                                                                                                                           | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) A mount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|------------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | CENTRAL AMERICA | BUILD AND STRENGTHEN DYNAMIC, REPRESENTATIVE AND SUSTAINABLE WORKER ORGANIZATIONS                                                                                                              | 7,019                    | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | SUPPORT FOR CENTRAL AMERICAN UNIONS IN THE AGRICULTURE SECTOR LIKE BANANA, FRUIT AND VEGETABLES                                                                                                | 5,750                    | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | SUPPORT FOR CENTRAL AMERICAN UNIONS IN THE AGRICULTURE SECTOR LIKE BANANA, FRUIT AND VEGETABLES                                                                                                | 8,058                    | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | PROMOTE LABOR RIGHTS COMPLIANCE BY STRENGTHENING THE ORGANIZATION, REPRESENTATION AND LEADERSHIP CAPACITIES OF WORKERS AND UNIONS IN THE CAFTA REGION TO EFFECTIVELY ADVOCATE FOR LABOR RIGHTS | 15,385                   | WIRE TRANSFER                   |                                    |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region      | (d) Purpose of grant                                                                                                                                                                           | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | CENTRAL AMERICA | PROMOTE LABOR RIGHTS COMPLIANCE BY STRENGTHENING THE ORGANIZATION, REPRESENTATION AND LEADERSHIP CAPACITIES OF WORKERS AND UNIONS IN THE CAFTA REGION TO EFFECTIVELY ADVOCATE FOR LABOR RIGHTS | 19,239                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | PROMOTE LABOR RIGHTS COMPLIANCE BY STRENGTHENING THE ORGANIZATION, REPRESENTATION AND LEADERSHIP CAPACITIES OF WORKERS AND UNIONS IN THE CAFTA REGION TO EFFECTIVELY ADVOCATE FOR LABOR RIGHTS | 16,385                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | PROMOTE FREEDOM OF ASSOCIATION COLLECTIVE BARGAINING AND COMPLIANCE WITH LABOR STANDARDS IN THE TELECOMMUNICATIONS INDUSTRY                                                                    | 8,200                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | PROMOTE FREEDOM OF ASSOCIATION COLLECTIVE BARGAINING AND COMPLIANCE WITH LABOR STANDARDS IN THE TELECOMMUNICATIONS INDUSTRY                                                                    | 5,800                    | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region      | (d) Purpose of grant                                                                                                                                                                                                            | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|----------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                              | CENTRAL AMERICA | PROMOTE LABOR RIGHTS COMPLIANCE BY STRENGTHENING THE ORGANIZATION, REPRESENTATION AND LEADERSHIP CAPACITIES OF WORKERS AND UNIONS IN THE COUNTRY                                                                                | 9,562                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT FOR CA UNIONS IN PORTS AIRPORT AND MARITIME SECTORS TO CONFRONT NEW CHALLENGES AND CHANGES IN THESE SECTORS, TO INCREASE THE LEVEL OF UNION REPRESENTATION OF MARGINALIZED WORKERS AND INCREASE THE COVERAGE OF WORKERS | 5,425                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT 3 ORGANIZERS & 1 COORDINATOR TO ASSIST THE ORGANIZATION IN DEVELOPING AND IMPLEMENTING ITS ORGANIZATIONAL STRATEGY                                                                                                      | 7,950                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT THE LEADERSHIP DEVELOPMENT AND TRAINING OF WOMEN FROM THE APPAREL AND TEXTILE SECTOR                                                                                                                                    | 5,064                    | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region      | (d) Purpose of grant                                                                                                                                                                                        | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|----------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                              | CENTRAL AMERICA | SUPPORT AND DIRECT A TEAM OF 4 ORGANIZERS TO DO OUTREACH TO WORKERS IN THE AGRICULTURE SECTOR WHO HAVE MINIMUM OF NO KNOWLEDGE ABOUT THEIR LABOR RIGHTS OR UNIONS                                           | 36,735                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT 3 ORGANIZERS & 1 COORDINATOR TO ASSIST THE ORGANIZATION IN DEVELOPING AND IMPLEMENTING ITS ORGANIZATIONAL STRATEGY                                                                                  | 32,691                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT FOR EDUCATION AND ORGANIZATIONAL UNION STRUCTURES AND WORKER ORGANIZATIONS OF UNION TO BUILD A CULTURE, TO ACHIEVE COMPLIANCE WITH LABOR RIGHRS THROUGH ACTIVITIES AND INTERVENTIONS OF THE WORKERS | 11,034                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT 1 ORGANIZER TO ASSIST THE ORGANIZATION IN DEVELOPING AND IMPLEMENTING ITS ORGANIZATIONAL STRATEGY                                                                                                   | 10,873                   | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region      | (d) Purpose of grant                                                                             | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|----------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                              | CENTRAL AMERICA | SUPPORT FOR DOCUMENTING AND REPORTING CASES OF VIOLENCE AGAINST TRADE UNIONISTS                  | 19,852                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT FOR THE LEADERSHIP DEVELOPMENT AND TRAINING OF WOMEN FROM THE APPAREL AND TEXTILE SECTOR | 7,248                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT FOR REGIONAL EXCHANGE FOR AGRICULTURE SECTOR UNIONS                                      | 11,178                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | CENTRAL AMERICA | SUPPORT FOR CENTRAL AMERICAN UNIONS IN THE AGRICULTURE SECTOR LIKE BANANA, FRUIT AND VEGETABLES  | 6,304                    | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region      | (d) Purpose of grant                                                                                                                                                                           | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | CENTRAL AMERICA | SUPPORT FOR CENTRAL AMERICAN UNIONS IN THE AGRICULTURE SECTOR LIKE BANANA, FRUIT AND VEGETABLES                                                                                                | 9,410                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | PROMOTE FREEDOM OF ASSOCIATION COLLECTIVE BARGAINING AND COMPLIANCE WITH LABOR STANDARDS IN THE TELECOMMUNICATIONS INDUSTRY                                                                    | 7,434                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | BUILD AND STRENGTHEN DYNAMIC, REPRESENTATIVE AND SUSTAINABLE WORKER ORGANIZATIONS                                                                                                              | 9,735                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | CENTRAL AMERICA | PROMOTE LABOR RIGHTS COMPLIANCE BY STRENDTHENING THE ORGANIZATION, REPRESENTATION AND LEADERSHIP CAPACITIES OF WORKERS AND UNIONS IN THE CAFTA REGION TO EFFECTIVELY ADVOCATE FOR LABOR RIGHTS | 9,970                    | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region                | (d) Purpose of grant                                                                                                                                                    | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | CENTRAL AMERICA           | SUPPORT FOR LEADERSHIP DEVELOPMENT TRAININGS WITH APPAREL AND TEXTILE WORKERS                                                                                           | 5,564                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | EAST ASIA AND THE PACIFIC | SUPPORT A SEMINAR ON LABOR ISSUES                                                                                                                                       | 8,338                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | EAST ASIA AND THE PACIFIC | BUILD THE CAPACITY OF WORKER ACTIVISTS TO DEFEND WORKER RIGHTS                                                                                                          | 13,459                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | EAST ASIA AND THE PACIFIC | SUPPORT COUNTRY TRADE UNIONS TO BUILD CAPACITY IN ORGANIZING, BARGAINING AND ADVOCACY, AND TO PROMOTE BETTER UNDERSTANDING ABOUT LABOR RELATIONS DEVELOPMENT AND ISSUES | 35,907                   | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region                | (d) Purpose of grant                                                                                                    | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV , appraisal, other) |
|--------------------------|---------------------------------------------|---------------------------|-------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|--------------------------------------------------------|
|                          |                                             | EAST ASIA AND THE PACIFIC | STRENGTHEN THE CAPACITY OF WORKERS AND ADVOCATES TO DEFEND WORKER RIGHTS                                                | 19,852                   | WIRE TRANSFER                   |                                   |                                        |                                                        |
|                          |                                             | EAST ASIA AND THE PACIFIC | STRENGTHEN THE CAPACITY OF WORKERS AND ADVOCATES TO DEFEND WORKER RIGHTS                                                | 80,895                   | WIRE TRANSFER                   |                                   |                                        |                                                        |
|                          |                                             | EAST ASIA AND THE PACIFIC | STRENGTHEN THE CAPACITY OF WORKERS AND ADVOCATES TO DEFEND WORKER RIGHTS                                                | 27,615                   | WIRE TRANSFER                   |                                   |                                        |                                                        |
|                          |                                             | EAST ASIA AND THE PACIFIC | EMPOWER OCCUPATIONAL SAFETY AND HEALTH (OSH) VICTIMS AND GRASSROOTS ADVOCATES TO ADVANCE THEIR OSH RIGHTS IN THE REGION | 37,963                   | WIRE TRANSFER                   |                                   |                                        |                                                        |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region                | (d) Purpose of grant                                                                                                    | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV , appraisal, other) |
|--------------------------|---------------------------------------------|---------------------------|-------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|--------------------------------------------------------|
|                          |                                             | EAST ASIA AND THE PACIFIC | STRENGTHEN THE CAPACITY OF WORKERS AND ADVOCATES TO DEFEND WORKER RIGHTS                                                | 13,022                   | WIRE TRANSFER                   |                                   |                                        |                                                        |
|                          |                                             | EAST ASIA AND THE PACIFIC | STRENGTHEN THE CAPACITY OF WORKERS AND ADVOCATES TO DEFEND WORKER RIGHTS                                                | 41,973                   | WIRE TRANSFER                   |                                   |                                        |                                                        |
|                          |                                             | EAST ASIA AND THE PACIFIC | EMPOWER OCCUPATIONAL SAFETY AND HEALTH (OSH) VICTIMS AND GRASSROOTS ADVOCATES TO ADVANCE THEIR OSH RIGHTS IN THE REGION | 139,437                  | WIRE TRANSFER                   |                                   |                                        |                                                        |
|                          |                                             | EAST ASIA AND THE PACIFIC | EMPOWER OCCUPATIONAL SAFETY AND HEALTH (OSH) VICTIMS AND GRASSROOTS ADVOCATES TO ADVANCE THEIR OSH RIGHTS IN THE REGION | 6,054                    | WIRE TRANSFER                   |                                   |                                        |                                                        |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region                | (d) Purpose of grant                                                                                                                                                                                                                                          | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|----------------------------------------------|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                              | EAST ASIA AND THE PACIFIC | BUILD THE CAPACITY OF LEGAL PRACTITIONERS, SCHOLARS AND ACTIVISTS TO PROMOTE LABOR LAW REFORMS AND DEFEND THE RIGHTS OF WORKERS                                                                                                                               | 12,526                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | EAST ASIA AND THE PACIFIC | WORK WITH UNION TO BUILD THEIR CAPACITY TO RECRUIT AND REPRESENT MEMBERS                                                                                                                                                                                      | 6,800                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | EAST ASIA AND THE PACIFIC | SUPPORT UNION TO BUILD CAPACITY TO REPRESENT WORKERS IN THE GREATER LOCAL AREA                                                                                                                                                                                | 8,553                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | EAST ASIA AND THE PACIFIC | SUPPORT EFFORTS BY TRADE UNIONS TO ORGANIZE, REPRESENT, AND PROTECT WORKERS AND LABOR RIGHTS ACTIVITISTS IN THE WORKPLACE AND TO PROMOTE COMPLIANCE WITH INTERNATIONALLY-RECOGNIZED LABOR STANDARDS AND PRACTICES IN WORKPLACE, IN LEGISLATION, AND IN POLICY | 107,351                  | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region                | (d) Purpose of grant                                                                                                                                                                                 | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | EAST ASIA AND THE PACIFIC | ORGANIZE AND PROTECT MIGRANT WORKERS FROM WORST FORMS OF EXPLOITATION                                                                                                                                | 73,299                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | EAST ASIA AND THE PACIFIC | PROMOTE FREEDOM OF ASSOCIATION AND THE RIGHT TO COLLECTIVE BARGAINING IN PRINCIPLE AND PRACTICE                                                                                                      | 39,877                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | EAST ASIA AND THE PACIFIC | SUPPORT PARTNERS CONDUCT MIGRANT WORKER EDUCATION AND EMPOWERMENT, AND CONDUCT STRATEGIC LITIGATION TO PROMOTE WORKER RIGHTS AND THE RULE OF LAW                                                     | 27,463                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | EAST ASIA AND THE PACIFIC | PROMOTE ACCESS TO JUSTICE BY PROVIDING VICTIMS LEGAL SUPPORT AND INCREASING INVESTIGATIONS AND PROSECUTIONS OF TRAFFICKERS FOR LABOR EXPLOITATION RAISE AWARENESS OF EXPLOITATION OF MIGRANT WORKERS | 55,160                   | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region                   | (d) Purpose of grant                                                                                                                      | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | EAST ASIA AND THE PACIFIC    | BUILD CAPACITY OF LEGAL PRACTITIONERS, SCHOLARS AND ACTIVISTS TO PROMOTE LABOR LAW REFORMS AND DEFEND THE RIGHTS OF WORKERS IN THE REGION | 22,955                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | EAST ASIA AND THE PACIFIC    | ORGANIZE AND PROTECT MIGRANT WORKERS FROM WORST FORMS OF EXPLOITATION                                                                     | 15,537                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | MIDDLE EAST AND NORTH AFRICA | SUPPORT THE EDUCATION OUTREACH WORK OF UNION ORGANIZERS                                                                                   | 9,401                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | NORTH AMERICA                | LABOR RIGHTHS, JUSTICE & WORKERS INTERESTS ARE BETTER PROMOTED AND PROTECTED BY UNIONS&NGOS                                               | 26,353                   | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region    | (d) Purpose of grant                                                                                           | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|---------------|----------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | NORTH AMERICA | SUPPORT RESEARCH & ORGANIZING CAMPAIGNS IN THE MINING/METAL/AUTOPARTS SECTOR WITH UNION                        | 17,865                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | NORTH AMERICA | ACTIVITIES IN COMMUNITIES WITH EXTRACTIVE INDUSTRY WORKERS, FILING FREEDOM OF ASSOCIATION COMPLAINS            | 17,143                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | SOUTH AMERICA | STRENGTHEN THE CAPACITY OF UNIONS IN THE CONSTRUCTION SECTOR TO ORGANIZE AND REPRESENT MARGINALIZED WORKERS    | 5,018                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | SOUTH AMERICA | SUPPORT 1 UNION ORGANIZER IN THE DEVELOPMENT AND IMPLEMENTATION OF THE ORGANIZING OUTREACH AND EDUCATION PLANS | 6,600                    | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region    | (d) Purpose of grant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) A mount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|------------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | SOUTH AMERICA | SUPPORT ONE-FULL TIME PROGRAM COORDINATOR OF THE UNION HUMAN RIGHTS NETWORK, WHO WILL ASSIST UNION AFFILIATES WITH COMPLAINS USING ILO AND INTER-AMERICAN HUMAN RIGHTS SYSTEM THE UNION COORDINATOR WILL WORK WITHIN UNION AND NATIONAL TRADE UNION CENTERS TO ASSIST IN THE PREPARATION OF THE COMPLAINTS REGARDING VIOLATIONS OF CORE LABOR STANDARDS, AND HELP THESE UNIONS MONITOR THE PROGRESS OF THE CASES THE UNION COORDINATOR WILL ASSIST IN ORGANIZING REGIONAL MEETINGS WITH RELEVANT UNION REPRESENTATIVES TO PREPARE FOR THE 104TH INTERNATIONAL LABOR CONFERENCE AND TO CONTINUE THE TRAINING PROGRAM ON THE USE OF THE INTER-AMERICAN HUMAN RIGHTS SYSTEM TO DEFEND FUNDAMENTAL LABOR RIGTHS UNION AND ITS HUMAN RIGHTS NETWORK COORDINATOR WILL ASSIST IN DEVELOPING PROJECT IDEAS FOR POSSIBLE EXTENSIONS OF THIS PROGRAM IN ADDITION, UNION, ITS HUMAN RIGHTSD NETWORK COORDINATOR, AND AFFILIATED NATIONAL LABOR CENTERS WILL DELIVER AT LEAST TWO FORMAL ILO COMPLAINTS FOR SUBMISSION TO ILO BODIES DURING 2015 | 24,212                   | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | SOUTH ASIA    | BUILD THE CAPACITY OF RURAL JOURNALISTS ADVOCATE FOR DECENT AND SAFE EMPLOYMENT WITH BOTH MEDIA ORGANIZATIONS & GOVERNMENT AGENCIES BUILD AND INSTITUTIONALIZE SUSTAINABLE LEGAL STRATEGIES THAT IMPROVE LABOR RIGHTS AND ENHANCE SECURITY OF JOURNALISTS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 6,383                    | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | SOUTH ASIA    | BUILD CAPACITY OF RURAL JOURNALISTS TO ADDRESS THREATS TO PHYSICAL SAFETY AND DIGITAL SECURITY BUILD AND INSTITUTIONALIZE SUSTAINABLE LEGAL STRATEGIES THAT IMPROVE LABOR RIGHTS AND ENHANCE SECURITY OF JOURNALISTS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 8,000                    | WIRE TRANSFER                   |                                    |                                        |                                                       |
|                          |                                             | SOUTH ASIA    | I) PRINTING OF A SERIES OF RESEARCH BASED WORKING PAPERS II) PREPARATION OF DRAFT LEGISLATION ON THE BONDED LABOR ABOLITION ACT SINDH WITH PROPOSED AMENDMENTS AND INPUTS FROM CIVIL SOCIETY III) DEVELOPMENT, PRINTING AND DISSEMINATION OF A QUARTERLY NEWSLETTER THAT WILL EXPLAIN THE SOCIAL BENEFITS TO WHICH BRICK KILN WORKERS ARE ENTITLED UNDER LOCAL LAW AND RAISE AWARENESS OF BASIC HUMAN RIGHTS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 20,520                   | WIRE TRANSFER                   |                                    |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant                                                                                             | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|--------------------|------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | SOUTH ASIA         | PROMOTE AWARENESS AND ENCOURAGE DIALOGUE ABOUT LABOR ISSUES AMONG WORKERS, POLICY MAKERS, AND OTHER STAKEHOLDERS | 11,900                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | SOUTH ASIA         | PROMOTE AWARENESS AND ENCOURAGE DIALOGUE ABOUT LABOR ISSUES AMONG WORKERS, POLICY MAKERS, AND OTHER STAKEHOLDERS | 11,371                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | SUB-SAHARAN AFRICA | PROVIDE 6 MONTHS OF INSTITUTIONAL SUPPORT TO UNION AND SUPPORT ONE 1-DAY NATIONAL CONFERENCE FOR 50 PARTICIPANTS | 22,750                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | SUB-SAHARAN AFRICA | SUPPORT FOR SALARY OF PARLIAMENTARY DESK OFFICER AND WORKER MAGAZINE EDITOR                                      | 16,640                   | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant                                                                                                                       | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                             | SUB-SAHARAN AFRICA | DIRECTOR SALARY SUPPORT                                                                                                                    | 10,000                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | SUB-SAHARAN AFRICA | CONDUCTED SIX TRAININGS IN EACH UNION REGIONAL OFFICE FOR 20 PARTICIPANTS DRAWN ONCE AGAIN FROM A MIX OF UNION AND COMMUNITY ORGANIZATIONS | 14,076                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | SUB-SAHARAN AFRICA | SUPPORT FOR THE SALARY OF UNION DIRECTOR                                                                                                   | 12,000                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                             | SUB-SAHARAN AFRICA | SUPPORT THE SALARY OF THE PARLIAMENTARY DESK OFFICER                                                                                       | 8,760                    | WIRE TRANSFER                   |                                   |                                        |                                                       |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region         | (d) Purpose of grant                                                                                                                                                                                                                                  | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|----------------------------------------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
|                          |                                              | SUB-SAHARAN AFRICA | SUPPORT OF THE PUBLICATION COST & THE SALARY OF THE COMMUNICATIONS OFFICER                                                                                                                                                                            | 15,000                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | SUB-SAHARAN AFRICA | TRAINING ANOTHER 120 UNION SHOP STEWARDS IN 6 DISTRICTS OF THE COUNTRY                                                                                                                                                                                | 6,646                    | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | NORTH AMERICA      | WORKERS' RIGHTS PROTECTED AND INTERNATIONAL LABOR STANDARDS PROMOTED THROUGH SUPPORT TO LABOR UNIONS AND NGOS THAT PROMOTE LABOR RIGHTS, LABOR JUSTICE, AND WORKERS' PARTICIPATION AND REPRESENTATION OF THEIR INTERESTS IN LOCAL AND NATIONAL ARENAS | 67,577                   | WIRE TRANSFER                   |                                   |                                        |                                                       |
|                          |                                              | NORTH AMERICA      | WORKERS' RIGHTS PROTECTED AND INTERNATIONAL LABOR STANDARDS PROMOTED THROUGH SUPPORT TO LABOR UNIONS AND NGOS THAT PROMOTE LABOR RIGHTS, LABOR JUSTICE, AND WORKERS' PARTICIPATION AND REPRESENTATION OF THEIR INTERESTS IN LOCAL AND NATIONAL ARENAS | 10,350                   | WIRE TRANSFER                   |                                   |                                        |                                                       |

# 2015

52-1984713

## Schedule I (Form 990) 2015

Part IIIGrants and Other Assistance to Domestic Individuals.

Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

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

Part IVSupplemental Information.

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

| Return Reference | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PART I, LINE 2   | SOLIDARITY CENTER HAS MONITORING POLICIES AND PROCEDURES WHICH ARE APPLIED TO ALL OF THE AGREEMENTS THE CENTER ISSUES TO OUR PARTNER'S ORGANIZATIONS THE AGREEMENTS SPECIFY THE TERMS, THE BUDGET AMOUNT AND PERIOD, THE SCOPE OF WORK, THE NARRATIVE AND FINANCIAL REPORT REQUIREMENTS ON HOW TO ACCOUNT FOR THE FUNDS GIVEN TO THE PARTNER'S ORGANIZATIONS ANY OTHER TERMS AND CONDITIONS SPECIFIED IN THE CENTER'S GRANT AGREEMENT ALSO FLOW DOWN TO THE CENTER'S SUBRECIPIENTS (PARTNERS) PARTNERS ARE RESPONSIBLE FOR MONITORING AND OVERSEEING THE PROGRESS AND IMPLEMENTATION OF THE PROGRAM ACTIVITIES ADVANCE FUNDS GIVEN FOR THE ASSISTANCE TO PARTNERS MUST BE ACCOUNTED FOR AND SUPPORTED BY LEGITIMATE RECEIPTS IN ORDER FOR THE EXPENSES TO BE ACCEPTED BY THE SOLIDARITY CENTER THE RECEIPTS SUBMITTED BY THE GRANTEEES ARE AUDITED BY OUR FINANCIAL STAFF THE CENTER ALSO REQUIRES SUBRECIPIENTS TO SUBMIT A-133 AUDIT REPORTS WHEN APPLICABLE TO THE GRANTEEES |

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 52-1984713  
**Name:** AMERICAN CENTER FOR INTERNATIONAL LABOR  
SOLIDARITY

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

| <b>(a)</b> Name and address of organization or government                                                     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance                                                                                |
|---------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------|---------------------------------|------------------------------------------|--------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| RUTGERS THE STATE UNIVERSITY OF NEW JERSEY<br>94 ROCKEFELLER ROAD<br>PISCATAWAY, NJ 08854                     | 22-6001086     | 170(B)(1)(A)(II)                     | 32,394                          |                                          |                                                              |                                               | CONDUCT RESEARCH                                                                                                         |
| WOMEN IN INFORMAL EMPLOYMENT<br>GLOBALIZING AND ORGANIZING<br>79 JOHN F KENNEDY STREET<br>CAMBRIDGE, MA 02138 |                |                                      | 30,350                          |                                          |                                                              |                                               | PROMOTE LABOR RIGHTS AND INTERNATIONAL LABOR STANDARDS                                                                   |
| WORKERS RIGHT CONSORTIUM<br>5 THOMAS CIRCLE NW 5TH FLOOR<br>WASHINGTON, DC 20005                              | 06-1596009     |                                      | 30,000                          |                                          |                                                              |                                               | PROVIDE SUPPORT TO PARTICIPATE IN LABOR COALITION AND IMPLEMENTATION OF ACCORD ON FIRE AND BUILDING SAFETY IN BANGLADESH |

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

|                                                                                |                                              |
|--------------------------------------------------------------------------------|----------------------------------------------|
| Name of the organization<br>AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY | Employer identification number<br>52-1984713 |
|--------------------------------------------------------------------------------|----------------------------------------------|

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 on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.<br><div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax indemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div> |                |                |
| b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 1b Yes         |                |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 2 Yes          |                |
| 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.<br><div><div><input type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>                                                                                                     |                |                |
| 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:<br><div><div>a Receive a severance payment or change-of-control payment?</div><div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div><div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div></div><br>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III                                                                                                                                                                                                                                                                                                                                  | 4a<br>4b<br>4c | No<br>No<br>No |
| Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                |                |
| 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:<br><div><div>a The organization?</div><div>b Any related organization?</div></div><br>If "Yes," on line 5a or 5b, describe in Part III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 5a<br>5b       |                |
| 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:<br><div><div>a The organization?</div><div>b Any related organization?</div></div><br>If "Yes," on line 6a or 6b, describe in Part III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 6a<br>6b       |                |
| 7 For persons listed on 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 on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8              |                |
| 9 If "Yes" on 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 on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

| (A) Name and Title        | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column(B) reported as deferred on prior Form 990 |
|---------------------------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|----------------------------------------------------------------------|
|                           | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |                                                |                         |                                 |                                                                      |
| See Additional Data Table |                                                    |                                     |                                     |                                                |                         |                                 |                                                                      |

**Part III Supplemental Information**

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

| Return Reference | Explanation                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PART I, LINE 1A  | SOLIDARITY CENTER PAYS HOUSING EXPENSES FOR ALL OF OUR EXPATS OVERSEAS. THE BENEFITS ARE CONSIDERED TAXABLE BENEFITS TO OUR EXPATS STAFF AND REPORTED ON THEIR W-2. THE CENTER REIMBURSES EACH STAFF UP TO \$185/YEAR FOR ANY HEALTH ENHANCEMENT EXPENSES SUCH AS MEMBERSHIP TO THE GYM, ETC.                                                                                                        |
| PART I, LINE 4   | PART I, LINE 4B. CERTAIN TRUSTEES WHO ARE ALSO OFFICERS OF THE AFL-CIO, A RELATED ORGANIZATION, PARTICIPATE IN A SUPPLEMENTAL NONQUALIFIED DEFERRED COMPENSATION ARRANGEMENT OF THE AFL-CIO. DURING 2015, RICHARD TRUMKA AND ELIZABETH SHULER PARTICIPATED IN SUCH PLAN BUT DID NOT RECEIVE ANY PAYMENTS FROM THE PLAN. DURING 2015, JOHN SWEENEY RECEIVED PAYMENTS FROM THE PLAN TOTALING \$28,458. |

Additional Data

Software ID:  
Software Version:  
EIN: 52-1984713  
Name: AMERICAN CENTER FOR INTERNATIONAL LABOR  
SOLIDARITY

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

| (A) Name and Title                             |      | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|------------------------------------------------|------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|-----------------------------------------------------------------------|
|                                                |      | (i) Base Compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |                                                |                         |                                 |                                                                       |
| 1ELIZABETH SHULER<br>SECRETARY - TREASURER     | (i)  | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                                     |
|                                                | (ii) | 238,975                                            | 0                                   | 5,600                               | 62,133                                         | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 26,092                                         | 332,800                 |                                 |                                                                       |
| 1RICHARD TRUMKACHAIR                           | (i)  | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                                     |
|                                                | (ii) | 272,250                                            | 0                                   | 15,193                              | 70,785                                         | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 26,161                                         | 384,389                 |                                 |                                                                       |
| 2TEFERE GEBREVICE CHAIR                        | (i)  | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                                     |
|                                                | (ii) | 238,975                                            | 0                                   | 2,008                               | 62,133                                         | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 25,805                                         | 328,921                 |                                 |                                                                       |
| 3SHAWNA BADER BLAU<br>EXECUTIVE DIRECTOR       | (i)  | 147,838                                            | 0                                   | 0                                   | 41,551                                         | 35,488                  | 224,877                         | 0                                                                     |
|                                                | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 0                                              | 0                       | 0                               |                                                                       |
| 4LYSTIA SANTOSA<br>DIRECTOR OF FINANCE         | (i)  | 125,140                                            | 0                                   | 0                                   | 41,393                                         | 30,034                  | 196,567                         | 0                                                                     |
|                                                | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 0                                              | 0                       | 0                               |                                                                       |
| 5KATHLEEN DOHERTY<br>DEPUTY DIRECTOR ED        | (i)  | 135,896                                            | 0                                   | 0                                   | 27,783                                         | 32,615                  | 196,294                         | 0                                                                     |
|                                                | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 0                                              | 0                       | 0                               |                                                                       |
| 6HANAD MOHAMMAD<br>COUNTRY PROGRAM DIRECTOR    | (i)  | 233,802                                            | 0                                   | 0                                   | 24,208                                         | 25,159                  | 283,169                         | 0                                                                     |
|                                                | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 0                                              | 0                       | 0                               |                                                                       |
| 7RICHARD HALL<br>COUNTRY PROGRAM DIRECTOR      | (i)  | 149,901                                            | 0                                   | 0                                   | 24,112                                         | 23,093                  | 197,106                         | 0                                                                     |
|                                                | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 0                                              | 0                       | 0                               |                                                                       |
| 8ROBERT PAJKOVSKI<br>COUNTRY PROGRAM DIRECTOR  | (i)  | 158,742                                            | 0                                   | 0                                   | 24,086                                         | 25,159                  | 207,987                         | 0                                                                     |
|                                                | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 0                                              | 0                       | 0                               |                                                                       |
| 9ALONZO SUSON<br>COUNTRY PROGRAM DIRECTOR      | (i)  | 182,536                                            | 0                                   | 0                                   | 24,112                                         | 25,159                  | 231,807                         | 0                                                                     |
|                                                | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 0                                              | 0                       | 0                               |                                                                       |
| 10GEOFFREY HERZOGS<br>COUNTRY PROGRAM DIRECTOR | (i)  | 161,458                                            | 0                                   | 0                                   | 15,817                                         | 23,961                  | 201,236                         | 0                                                                     |
|                                                | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | -                       | -                               | 0                                                                     |
|                                                |      |                                                    |                                     |                                     | 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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).**2015****Open to Public  
Inspection**Name of the organization  
AMERICAN CENTER FOR INTERNATIONAL LABOR  
SOLIDARITY**Employer identification number**

52-1984713

**990 Schedule O, Supplemental Information**

| Return Reference                          | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION B, LINE<br>11  | A DRAFT OF THE 990 IS SENT TO THE AUDIT AND FINANCE COMMITTEE FOR THEIR REVIEW AND APPROVAL                                                                                                                                                                                                                                                                                                                                                                                            |
| FORM 990, PART VI, SECTION B, LINE<br>12C | THE CONFLICT OF INTEREST POLICY IS INCORPORATED INTO THE EMPLOYEE'S HANDBOOK AND COLLECTIV<br>E BARGAINING AGREEMENT (CBA) THE HANDBOOK IS DISTRIBUTED TO ALL STAFF AND RETAINED<br>BY STA<br>FF FOR THE REFERENCE ON SOLIDARITY CENTER'S OPERATING POLICY AND PROCEDURES<br>DURING THE OR<br>IENTATION FOR NEW EMPLOYEE, SOLIDARITY CENTER'S HR REVIEW THE CENTER'S POLICY AND<br>PROCEDUR<br>ES, INCLUDING CONFLICT OF INTEREST POLICY AND MADE THE NEW STAFF AWARE OF OUR<br>POLICY |

**990 Schedule O, Supplemental Information**

| Return<br>Reference                   | Explanation                                                                                                                                                                                                                                                                                                                                                                                                  |
|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION B, LINE 15 | THE PROCESS OF DETERMINING COMPENSATION - SOLIDARITY CENTER HAS THE PAY SCALES OR STRUCTURES THAT ARE APPROVED BY THE AFL-CIO FOR THE EXECUTIVE DIRECTOR, DEPUTY EXECUTIVE DIRECTOR AND THE MANAGERS THE PAY SCALES WERE DIVIDED INTO CATEGORIES FOR EACH POSITION FOR MANAGEMENT AND STAFF EACH YEAR, THE PAY SCALES MAY BE ADJUSTED FOR COLA INCREASES IN ACCORDANCE WITH ANY INCREASE MADE BY THE AFL-CIO |
| FORM 990, PART VI, SECTION C, LINE 19 | THE DOCUMENTS ARE AVAILABLE UPON REQUEST                                                                                                                                                                                                                                                                                                                                                                     |

**990 Schedule O, Supplemental Information**

| Return Reference            | Explanation                                                                 |
|-----------------------------|-----------------------------------------------------------------------------|
| FORM 990, PART XI, LINE 9   | POSTRETIREMENT BENEFIT COSTS OTHER THAN NET PERIODIC BENEFIT COST 1,405,972 |
| FORM 990, PART XII, LINE 2C | THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR                             |

SCHEDULE R  
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

|                                                                                |                                              |
|--------------------------------------------------------------------------------|----------------------------------------------|
| Name of the organization<br>AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY | Employer identification number<br>52-1984713 |
|--------------------------------------------------------------------------------|----------------------------------------------|

Part I

Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a)<br>Name, address, and EIN (if applicable) of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>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)<br>Name, address, and EIN of related organization                                                                                          | (b)<br>Primary activity                                    | (c)<br>Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity                   | (g)<br>Section 512(b)(13) controlled entity? |    |
|------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|--------------------------------------------------|----------------------------|-----------------------------------------------------|----------------------------------------------------|----------------------------------------------|----|
|                                                                                                                                                |                                                            |                                                  |                            |                                                     |                                                    | Yes                                          | No |
| EDUCATION FUND OF THE AMERICAN CENTER FOR INTERNATIONAL LABOR<br>(1)SOLIDARITY<br>888 16TH STREET NW<br><br>WASHINGTON, DC 20006<br>52-1984719 | BETTERMENT OF THE LIVES OF WORKING MEN AND WOMEN WORLDWIDE | DC                                               | 501(C)(3)                  | LINE 7                                              | AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY | Yes                                          |    |
| (2)<br>AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS<br>888 16TH STREET NW<br><br>WASHINGTON, DC 20006<br>53-0228172   | FEDERATION OF LABOR UNIONS                                 | DC                                               | 501(C)(5)                  |                                                     | N/A                                                |                                              | No |
|                                                                                                                                                |                                                            |                                                  |                            |                                                     |                                                    |                                              |    |
|                                                                                                                                                |                                                            |                                                  |                            |                                                     |                                                    |                                              |    |
|                                                                                                                                                |                                                            |                                                  |                            |                                                     |                                                    |                                              |    |
|                                                                                                                                                |                                                            |                                                  |                            |                                                     |                                                    |                                              |    |
|                                                                                                                                                |                                                            |                                                  |                            |                                                     |                                                    |                                              |    |

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

| (a)<br>Name, address, and EIN of<br>related organization | (b)<br>Primary activity | (c)<br>Legal<br>domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct<br>controlling<br>entity | (e)<br>Predominant<br>income(related,<br>unrelated,<br>excluded from<br>tax under<br>sections 512-<br>514) | (f)<br>Share of<br>total income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Disproportionate<br>allocations? |    | (i)<br>Code V-UBI<br>amount in box<br>20 of<br>Schedule K-1<br>(Form 1065) | (j)<br>General or<br>managing<br>partner? |    | (k)<br>Percentage<br>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)<br>Name, address, and EIN of<br>related organization | (b)<br>Primary activity | (c)<br>Legal<br>domicile<br>(state or foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Type of entity<br>(C corp, S<br>corp,<br>or trust) | (f)<br>Share of total<br>income | (g)<br>Share of end-<br>of-year<br>assets | (h)<br>Percentage<br>ownership | (i)<br>Section 512<br>(b)(13)<br>controlled<br>entity? |    |
|----------------------------------------------------------|-------------------------|-----------------------------------------------------------|-------------------------------------|-----------------------------------------------------------|---------------------------------|-------------------------------------------|--------------------------------|--------------------------------------------------------|----|
|                                                          |                         |                                                           |                                     |                                                           |                                 |                                           |                                | Yes                                                    | No |
|                                                          |                         |                                                           |                                     |                                                           |                                 |                                           |                                |                                                        |    |
|                                                          |                         |                                                           |                                     |                                                           |                                 |                                           |                                |                                                        |    |
|                                                          |                         |                                                           |                                     |                                                           |                                 |                                           |                                |                                                        |    |
|                                                          |                         |                                                           |                                     |                                                           |                                 |                                           |                                |                                                        |    |
|                                                          |                         |                                                           |                                     |                                                           |                                 |                                           |                                |                                                        |    |
|                                                          |                         |                                                           |                                     |                                                           |                                 |                                           |                                |                                                        |    |
|                                                          |                         |                                                           |                                     |                                                           |                                 |                                           |                                |                                                        |    |

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

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

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

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

**b** Gift, grant, or capital contribution to related organization(s) . . . . .

**c** Gift, grant, or capital contribution from related organization(s) . . . . .

**d** Loans or loan guarantees to or for related organization(s) . . . . .

**e** Loans or loan guarantees by related organization(s) . . . . .

**f** Dividends from related organization(s) . . . . .

**g** Sale of assets to related organization(s) . . . . .

**h** Purchase of assets from related organization(s) . . . . .

**i** Exchange of assets with related organization(s) . . . . .

**j** Lease of facilities, equipment, or other assets to related organization(s) . . . . .

**k** Lease of facilities, equipment, or other assets from related organization(s) . . . . .

**l** Performance of services or membership or fundraising solicitations for related organization(s) . . . . .

**m** Performance of services or membership or fundraising solicitations by related organization(s) . . . . .

**n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .

**o** Sharing of paid employees with related organization(s) . . . . .

**p** Reimbursement paid to related organization(s) for expenses . . . . .

**q** Reimbursement paid by related organization(s) for expenses . . . . .

**r** Other transfer of cash or property to related organization(s) . . . . .

**s** Other transfer of cash or property from related organization(s) . . . . .

|           | Yes | No |
|-----------|-----|----|
|           |     |    |
| <b>1a</b> |     | No |
| <b>1b</b> |     | No |
| <b>1c</b> | Yes |    |
| <b>1d</b> |     | No |
| <b>1e</b> |     | No |
| <b>1f</b> |     | No |
| <b>1g</b> |     | No |
| <b>1h</b> |     | No |
| <b>1i</b> |     | No |
| <b>1j</b> |     | No |
| <b>1k</b> | Yes |    |
| <b>1l</b> |     | No |
| <b>1m</b> |     | No |
| <b>1n</b> | Yes |    |
| <b>1o</b> | Yes |    |
| <b>1p</b> | Yes |    |
| <b>1q</b> |     | No |
| <b>1r</b> |     | No |
| <b>1s</b> |     | No |

| <b>2</b> 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)<br>Name of related organization                                                                                                                                                  | (b)<br>Transaction type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
| (1)EDUCATION FUND OF THE AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY                                                                                                          | M                             | 62,344                 | ACTUAL COST REIMBURSEMENT                    |
| (2)AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS                                                                                                             | C                             | 300,000                | ACTUAL AMOUNT CONTRIBUTED                    |
| (3)EDUCATION FUND OF THE AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY                                                                                                          | N                             | 242,520                | ACTUAL COST REIMBURSEMENT                    |
|                                                                                                                                                                                      |                               |                        |                                              |
|                                                                                                                                                                                      |                               |                        |                                              |
|                                                                                                                                                                                      |                               |                        |                                              |

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**

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

| Return Reference | Explanation |
|------------------|-------------|
|------------------|-------------|