DLN: 93493322004299 OMB No 1545-0047 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization
AMERICAN CENTER FOR INTERNATIONAL LABOR D Employer identification number B Check if applicable ☐ Address change 52-1984713 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number Number and street (or P O box if mail is not delivered to street address) 1130 CONNECTICUT AVENUE NW NO 800 ☐ Amended return □ Application pending (202) 974-8383 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC  $\,$  20036 G Gross receipts \$ 34,202,021 Name and address of principal officer H(a) Is this a group return for SHAWNA BADER-BLAU □Yes ☑No subordinates? 1130 CONNECTICUT AVENUE NW NO 800 H(b) Are all subordinates WASHINGTON, DC 20036 ☐ Yes ☐No included? Tax-exempt status ☐ 501(c)(3) **☑** 501(c)(5) **◄**(insert no) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► SOLIDARITYCENTER ORG L Year of formation 1997 M State of legal domicile DC Summary 1 Briefly describe the organization's mission or most significant activities TO EMPOWER WORKERS TO RAISE THEIR VOICE FOR DIGNITY ON THE JOB, JUSTICE IN THEIR COMMUNITIES AND GREATER EQUALITY IN THE GLOBAL ECONOMY Activities & Governance Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 4 6 Number of independent voting members of the governing body (Part VI, line 1b) 96 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b 89.534 **Prior Year Current Year** 31,515,180 32,526,000 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 65,457 394,670 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 30,764 32,920,670 31,611,401 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3). 1,957,954 2,555,804 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 18,530,860 18,176,300 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 11,820,430 11,777,969 32,309,244 32,510,073 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . -697,843 410,597 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 13,177,973 12,917,047 21 Total liabilities (Part X, line 26) . 12,469,760 12,661,244 255,803 22 Net assets or fund balances Subtract line 21 from line 20 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 2019-11-18 Signature of officer Sign Here MICHAEL LAWRENCE EXECUTIVE DIRECTOR Type or print name and title Date Print/Type preparer's name Preparer's signature Check I If P01324904 Paid self-employed Firm's name CALIBRE CPA GROUP PLLC Firm's EIN > 47-0900880 **Preparer** Use Only Firm's address ► 7501 WISCONSIN AVENUE SUITE 1200 Phone no (202) 331-9880 BETHESDA, MD 20814 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)				Page <b>2</b>
Pa	rt III Statemen	t of Program Service Ac	complishments		
	Check If Sch	nedule O contains a response o	r note to any line in this Part III .		🗹
1	Briefly describe the	organization's mission			
	MPOWER WORKERS T BAL ECONOMY	TO RAISE THEIR VOICE FOR D	IGNITY ON THE JOB, JUSTICE IN TH	EIR COMMUNITIES AND GREATI	ER EQUALITY IN THE
2	-	, , ,	ogram services during the year which		□ Yes ☑ No
	•				⊔ Yes ⊻ No
3	•	nese new services on Schedule	: O Ignificant changes in how it conducts		
3	-		•	, any program	□yes ✓No
		nese changes on Schedule O			□ Yes ▼ NO
4	Section 501(c)(3) a		mplishments for each of its three large e required to report the amount of gr service reported		
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data				
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data				
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data				
	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
		RIGHTS OVERSEAS INCLUDING THE WORKER RIGHTS IN EMERGING	HE PROTECTION OF CHILDREN FROM EXPLO G DEMOCRACIES	DITATION PROMOTED FREEDOM OF	ASSOCIATION, COLLECTIVE
4d	Other program serv	vices (Describe in Schedule O	)		
	(Expenses \$		grants of \$	) (Revenue \$	)
4e	Total program se	rvice expenses ►			

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Pa	t 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.  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, VIII, VIII, IX, or X as applicable			
а	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	
	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
	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	
е	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 2	12a		No

Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 为 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Nο 14a Yes Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . business, investment, and program service activities outside the United States, or aggregate foreign investments 14b valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 15 ارج foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 Nο or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 Nο 17

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) . . . . . Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

18 No Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 20a

19 Nο 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . No b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . . Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, 22

column (A), line 2<sup>o</sup> If "Yes," complete Schedule I, Parts I and III . . . . . . .

	Checklist of Required Schedules (continued)			
			Yes	No
3	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? If "Yes," complete Schedule J	23	Yes	
ła	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? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		
i	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?  If "Yes," complete Schedule L, Part II	26		No
•	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? If "Yes," complete Schedule L, Part III	27		No
	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)			
3	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,  Part IV	28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? If "Yes," complete Schedule L, Part IV	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
а	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
	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? If "Yes," complete Schedule R, Part VI	37		No
1	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	38	Yes	
aı	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	٠.		⊻

1a

1b

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Yes

32

0

7b

7c

7e 7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

Nο

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7d

10a

10b

11a

11b

12b

13b

13c

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

**b** Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

**d** If "Yes," indicate the number of Forms 8282 filed during the year . . . .

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . .

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

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	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					
tion	cion A. Governing Body and Management					

	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			<b>✓</b>
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  1a  9			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
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>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	l
ь	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			
c	conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	12b	Yes	
Ĭ	Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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?	16b		
Se	ction 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-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O)  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 - QUOC NGUYEN 1130 CONNECTICUT AVENUE NW SUITE WASHINGTON, DC 20036 (202) 974-8323 Form **990** (2018) 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

<ul> <li>List all of the organization's former officers, of reportable compensation from the organization</li> </ul>					pen	sated	emp	oloyees who receive	ed more than \$100	1,000
<ul> <li>List all of the organization's former directo organization, more than \$10,000 of reportable co</li> </ul>										
List persons in the following order individual true compensated employees, and former such perso		rs, ınstı	itutio	nal t	rust	tees,	office	ers, key employees	s, highest	
Check this box if neither the organization no	r any related or	ganızat	tion c	omp	ens	ated a	any c	current officer, dire	ctor, or trustee	
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	pers	an on on is	e bo botl	t che x, u n an	eck m inless office	er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) RICHARD TRUMKA	2 00									
CHAIR	38 00	×		X				0	279,224	99,427
(2) TEFERE GEBRE	2 00	l								
VICE CHAIR	38 00	×		X				0	237,229	86,760
(3) ELIZABETH SHULER	2 00	х		×				0	237,229	95,424
SECRETARY - TREASURER	38 00									
(4) TERRENCE MELVIN TRUSTEE	2 00	×						0	0	0
(5) ART PULASKI	2 00	,								
TRUSTEE	2 00	×						0	0	0
(6) LEO GERARD TRUSTEE	2 00	×						0	0	0
(7) ROBERT MARTINEZ TRUSTEE	2 00							0	0	0
(8) JOSLYN N WILLIAMS	2 00	×						0	0	0
TRUSTEE	2 00						Ш			
(9) DOUG MOORE	2 00	×						0	0	0

		l					-	(11) 3 (4 0 0 0	(141 014000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) RICHARD TRUMKA CHAIR	2 00	×		х				0	279,224	99,427
(2) TEFERE GEBRE VICE CHAIR	38 00 2 00 38 00	×		х				0	237,229	86,760
(3) ELIZABETH SHULER SECRETARY - TREASURER	2 00 38 00	×		×				0	237,229	95,424
(4) TERRENCE MELVIN TRUSTEE	2 00	×						0	0	0
(5) ART PULASKI TRUSTEE	2 00	×						0	0	0
(6) LEO GERARD TRUSTEE	2 00	×						0	0	0
(7) ROBERT MARTINEZ TRUSTEE	2 00	х						0	0	0
(8) JOSLYN N WILLIAMS TRUSTEE	2 00	х						0	0	0
(9) DOUG MOORE TRUSTEE	2 00	×						0	0	0
(10) SHAWNA BADER BLAU EXECUTIVE DIRECTOR	40 00 2 00			×				152,090	0	82,121
(11) LYSTIA SANTOSA DIRECTOR OF FINANCE	40 00 2 00			×				133,727	0	77,312
(12) KATHLEEN DOHERTY DEPUTY DIRECTOR ED (THRU MARCH 2018)	40 00 2 00			х				56,997	0	29,829
(13) HANAD MOHAMMAD COUNTRY PROGRAM DIRECTOR	35 00					х		269,409	0	56,531
(14) HIND CHERROUK	40 00					V		173 160	-	57 360

0 0 1 0 173,160 57,360 35 00 Х 153,199 0 54,879 (16) ROBERT PAJKOVSKI 35 00 Χ 170,393 44,038 COUNTRY PROGRAM DIRECTOR 35 00 (17) SAMANTHA TATE Х 167.879 45.045 CPD/PROGRAM OFFICER

REGIONAL PROGRAM DIRECTOR (15) ALONZO SUSON COUNTRY PROGRAM DIRECTOR

Form **990** (2018)

Form 990 (2018) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other is both an officer and a week (list from the from related compensation director/trustee) organization (Worganizations (Wany hours from the for related Highest comp employee 2/1099-MISC) 2/1099-MISC) organization and individual true or director Officer organizations Institutional related below dotted organizations employe line)

	કહિંહ	โกยรูโลล	ID I	oensated		
	·					
				·		

1b 9	1b Sub-Total										
c ·	Fotal from continuation sheets to Pa	art VII <b>, Section</b>	Α				▶				
d.	Fotal (add lines 1b and 1c)						•		1,276,854	753,682	728,726
2	Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who	rece	eived more than \$1	00,000	

ub-Total		. •					
otal from continuation sheets to Pa	art VII <b>, Section A</b>	. ▶					
otal (add lines 1b and 1c)		. ▶	1,276,854	753,682			728,726
		d above) wh	o received more than	\$100,000			
	organización r 31						
	organization P 31				Т	Yes	No
ľ	Total from continuation sheets to Pa Total (add lines 1b and 1c)	Total from continuation sheets to Part VII, Section A		Total from continuation sheets to Part VII, Section A	Total from continuation sheets to Part VII, Section A	Total from continuation sheets to Part VII, Section A	Total from continuation sheets to Part VII, Section A ▶ 1,276,854 753,682  Total number of individuals (including but not limited to those listed above) who received more than \$100,000

сΊ	Total from continuation sheets to Part VII, Section A			
d T	Total (add lines 1b and 1c)	2		728,726
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 $\blacktriangleright$ 51			
			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			_
	matvidual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			

d	「otal (add lines 1b and 1c)	1,276,854	753,68	32		728,726
2	Total number of individuals (including but not limited to those listed above) who rof reportable compensation from the organization $ ightharpoonup$ 51	eceived more than :	\$100,000			
					Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or line 1a? <i>If "Yes," complete Schedule J for such individual</i>			3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and oth organization and related organizations greater than \$150,000? If "Yes," complete					
	individual			4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelate	ed organization or ir	ndıvıdual for			

d	d Total (add lines 1b and 1c)			
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 $\triangleright$ 51			
			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			
	managar	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			

	of reportable compensation from the organization > 31			
			Yes	No
3	Did the organization list any <b>former</b> 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			
	ındıvıdual	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
	action B. Indonesidant Contractors			

			Yes	No
3	Did the organization list any <b>former</b> 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
S	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensations.	pensa	ition	

	organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for individual			Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization	on or individual for	-	165	_	
	services rendered to the organization? If "Yes," complete Schedule J for such person	l l	5		No	
S	ection B. Independent Contractors					
1	Complete this table for your five highest compensated independent contractors that received me from the organization. Report compensation for the calendar year ending with or within the organization.		pensa	ition		
	(A)	(B)		(C	)	
	Name and business address Description of services					
AMERICAN TECHNOLOGY SERVICES IT SERVICES			106,202			

			4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or services rendered to the organization? If "Yes," complete Schedule J for such person		5		No
Se	ction B. Independent Contractors				
1	Complete this table for your five highest compensated independent contractors that received more from the organization. Report compensation for the calendar year ending with or within the organization.		pensa	tion	
	(A)	(B)		(C	)
	Name and business address	Description of services		Compen	sation
AMER	ICAN TECHNOLOGY SERVICES IT SER	/ICES			106,202
	PROSPERITY AVENUE 6TH FLOOR AX, VA 22031				

_ 5	ection B. Independent Contractors		
1	Complete this table for your five highest compensated independent contractor from the organization. Report compensation for the calendar year ending with		ensation
	( <b>A)</b> Name and business address	(B) Description of services	(C) Compensation
AMER	RICAN TECHNOLOGY SERVICES	IT SERVICES	106,202
	PROSPERITY AVENUE 6TH FLOOR FAX, VA 22031		

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** (2018)

		(2018)											Page <b>9</b>
Part	VII	<del></del>											
		Check if Schedul	le O contains a	a respo	onse or	note to any		(A) I revenue	(B Relate exen funct	) d or npt	(C) Unrelat busines	ss	(D) Revenue excluded from tax under sections
	1	a Federated campaign	ns	1a					rever	nue			512 - 514
nts nts		<b>b</b> Membership dues		1b	<u> </u> 								
irat 10u		c Fundraising events		1c	<u> </u>								
S, G An		d Related organizatio		1d	<u> </u> 	300,000							
활동		e Government grants (co		1e	<u> </u> 	31,870,749							
E S		f All other contributions,	·	Te	<u> </u> 	31,670,749							
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts no		1f		355,251							
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution	ons included										
		ın lınes 1a - 1f \$											
<u>ರ ಕ</u>		<b>h Total.</b> Add lines 1a	-1f	•		. •		32,526,000					
ue	_					Business	s Code						
Ne.	2a			-				-					
Program Service Revenue	Ŀ	· ———		_				1					
Š	C	•											
₹	•												
ran		e ————————————————————————————————————											
ည့်		J <b>Total.</b> Add lines 2a-2			<b>&gt;</b>								
_		Investment income (ii				and other	1				1		
			· · · ·		iliterest	, and other	•	48,050					48,050
		Income from investme					-						
	5	Royalties	(ı) Real			Personal	<u> </u>						
	6	a Gross rents	(I) Real		(11)	reisonai	$\dashv$						
							_						
		<b>b</b> Less rental expenses											
	•	c Rental income or					1						
		d Net rental income o	r (loss)				-						
		a Net rental income of	(ı) Securit			) Other	+						
	78	a Gross amount from sales of	1.6	27.071		•	7						
		assets other than inventory	1,6	27,971									
		<b>b</b> Less cost or					4						
		other basis and sales expenses	1,2	81,351									
	•	C Gain or (loss)	3	46,620			1						
		<b>d</b> Net gain or (loss) .				<b>&gt;</b>		346,620					346,620
	8	Gross income from form form form form form form for the form of		ents of									
ž		contributions reporte	ed on line 1c)		ļ								
eve		See Part IV, line 18					4						
ھ ا		<b>b</b> Less direct expense. <b>c</b> Net income or (loss)		<b>b</b> ina ev	ents .	· •							
Other Revenue		Gross income from g	jaming activiti										
0		See Part IV, line 19		_	ļ								
		<b>b</b> Less direct expense:	ic.	a b			-						
		c Net income or (loss)			les .	. •							
		aGross sales of invent	tory, less										
		returns and allowand	ces	а	 								
	ı	<b>b</b> Less cost of goods s	sold	b			-						
		c Net income or (loss)	from sales of	invent	tory .	. •	_						
	_	Miscellaneous	Revenue		Busi	ness Code	_						
	11	1a											
		<b>b</b>					-						
		с					-						
		-											
		d All other revenue .											
		e Total. Add lines 11a			٠	. •							
	12	<b>2 Total revenue.</b> See	Instructions								1		
								32,920,670			0	0	394,670 Form <b>990</b> (2018)

orm 990 (2018)				Page <b>1</b>
Part IX Statement of Functional Expenses ection 501(c)(3) and 501(c)(4) organizations must complete all col	lumns All other orga	anızatıons must com	plete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .		<u></u>	<u> <math>\square</math></u>
o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	26,747			
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	2,529,057			
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	532,076			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7 Other salaries and wages	11,254,103			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	2,095,040			
9 Other employee benefits	3,555,422			
L <b>0</b> Payroll taxes	739,659			
L1 Fees for services (non-employees)				
a Management				
<b>b</b> Legal <b></b>	136,258			
c Accounting	188,400			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
	2 721 476			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,731,476			
2 Advertising and promotion	20,157			
3 Office expenses	1,535,119			
.4 Information technology	203,485			
. <b>6</b> Occupancy	1,499,487			
L7 Travel	4,381,769			
L8 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
9 Conferences, conventions, and meetings	498,029			
20 Interest				
21 Payments to affiliates				
2 Depreciation, depletion, and amortization	212,010			
3 Insurance	166,519			
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)	200,023			
a BAD DEBT	98,850			
b STAFF TRAINING AND TUIT	64,812			
c LEGAL ASSISTANT PROGRAM	45,482			
d REPRESENTATION	28,864			
e All other expenses	-32,748			
25 Total functional expenses. Add lines 1 through 24e	32,510,073			
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation  Check here Infollowing SOP 98-2 (ASC 958-720)				

Form 990 (2018)

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Liabilities

Assets or Fund Balances

Net

Check if Schedule O contains a response or note to any line in this Part IX			🗆
	<b>(A)</b> Beginning of year		( <b>B</b> ) End of year
1 Cash-non-interest-bearing	3,336,533	1	2,681,035
2 Savings and temporary cash investments	118,909	2	119,052
3 Pledges and grants receivable, net	486,638	3	1,084,813
4 Accounts receivable, net	5,494	4	3,273
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	

	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations. Part II of Schedule L	n 4958 ations o (see ins	(c)(3)(B), and f section 501(c)(9) structions) Complete		6	
ets	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use				8	
۷	9	Prepaid expenses and deferred charges			474,251	9	5
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	2,411,669			
	b	Less accumulated depreciation	10b	495,772	2,122,911	10c	1,9
	11	Investments—publicly traded securities .			5,523,555	11	5,2
	12	Investments—other securities See Part IV, line	11 .			12	
	13	Investments—program-related See Part IV, line	e 11     .			13	
	14	Intangible assets				14	

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties

persons Complete Part II of Schedule L .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

and other liabilities not included on lines 17 - 24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

٨	9	Prepaid expenses and deferred charges			474,251	9	512,665
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	2,411,669			
	b	Less accumulated depreciation	10b	495,772	2,122,911	10c	1,915,897
	11	Investments—publicly traded securities .			5,523,555	11	5,275,888
	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			1,109,682	15	1,324,424
	16	Total assets.Add lines 1 through 15 (must equ	al line	34)	13,177,973	16	12,917,047
	17 Accounts payable and accrued expenses		12,037,017	17	11,901,616		
					18		
	19	Deferred revenue	321,611	19	315,675		
	20	Tax-exempt bond liabilities		i i		20	

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443.953

12.661.244

255.803

255,803

12,917,047

Form **990** (2018)

111,132

12,469,760

708.213

708,213

13,177,973

3a

3b

Yes

Yes (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

Audit Act and OMB Circular A-133?

# **Additional Data**

Software Version:

Software ID:

Name: AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY

**EIN:** 52-1984713

Form 990 (2018)

Form 990, Part III, Line 4a:

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

Form 990, Part III, Line 4b: 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

#### Form 990, Part III, Line 4c: CONDUCTED STUDIES OF INTERNATIONAL LABOR ISSUES THROUGH A GLOBAL PROGRAM OF RESEARCH ACTIVITIES AND PUBLICATIONS.

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**Supplemental Financial Statements** 

Complete if the organization answered "Yes," on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.qov/Form990 for the latest information.

OMB No 1545-0047

DLN: 93493322004299

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization AMERICAN CENTER FOR INTERNATIONAL LABOR		Employer identification number
SOLIDARITY		52-1984713
	Donor Advised Funds or Other Similar	
Complete if the organization	answered "Yes" on Form 990, Part IV, line (a) Donor advised fund	
Total number at end of year	(a) Donor advised fund	(b)Funds and other accounts
Aggregate value of contributions to (duri	ng vezr)	+
Aggregate value of grants from (during y	- · · · <u>— — — — — — — — — — — — — — — — </u>	
Aggregate value at end of year	year)	
,	nd donor advisors in writing that the assets held i	un demon advised fivede are the
organization's property, subject to the o	organization's exclusive legal control?	☐ Yes ☐ No
charitable purposes and not for the bene private benefit?	, donors, and donor advisors in writing that grant efit of the donor or donor advisor, or for any othe	er purpose conferring impermissible
-	Complete if the organization answered "Yes	s" on Form 990, Part IV, line 7.
Purpose(s) of conservation easements h	neld by the organization (check all that apply)	
Preservation of land for public use	(e g , recreation or education)	ration of an historically important land area
Protection of natural habitat	☐ Preserv	vation of a certified historic structure
Preservation of open space		
Complete lines 2a through 2d if the orga easement on the last day of the tax yea	anızatıon held a qualıfıed conservatıon contributio ır	on in the form of a conservation  Held at the End of the Year
a Total number of conservation easements	5	2a
<b>b</b> Total acreage restricted by conservation	easements	2b
Number of conservation easements on a	certified historic structure included in (a)	2c
d Number of conservation easements inclu structure listed in the National Register	ided in (c) acquired after 7/25/06, and not on a h	nistoric 2d
Number of conservation easements moderate tax year ▶	dified, transferred, released, extinguished, or tern	ninated by the organization during the
Number of states where property subjec	ct to conservation easement is located <b>&gt;</b>	
Does the organization have a written po and enforcement of the conservation ea	olicy regarding the periodic monitoring, inspection sements it holds?	i, handling of violations,
Staff and volunteer hours devoted to mo	onitoring, inspecting, handling of violations, and e	enforcing conservation easements during the year
Amount of expenses incurred in monitor  \$ \begin{align*}  \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ring, inspecting, handling of violations, and enforc	cing conservation easements during the year
Does each conservation easement report and section $170(h)(4)(B)(n)$ ?	rted on line 2(d) above satisfy the requirements o	of section 170(h)(4)(B)(i)
	ion reports conservation easements in its revenue , the text of the footnote to the organization's fin vation easements	e and expense statement, and
Complete if the organization	g Collections of Art, Historical Treasure answered "Yes" on Form 990, Part IV, line	8.
art, historical treasures, or other similar	d under SFAS 116 (ASC 958), not to report in its in assets held for public exhibition, education, or re thote to its financial statements that describes the	esearch in furtherance of public service,
	d under SFAS 116 (ASC 958), to report in its reve ets held for public exhibition, education, or reseal ns	
(i) Revenue included on Form 990, Part VI	III, line 1	<b>&gt;</b> \$
(ii) Assets included in Form 990, Part X		<u> </u>
• •	ks of art, historical treasures, or other similar ass	ets for financial gain, provide the
	ed under SFAS 116 (ASC 958) relating to these it	tems
	, , , <del>,</del>	► \$

Par	t III	Organizations Mainta	ining Coll	ections of Art,	Histor	ical Tı	reası	ures, or Other	· Similar As	sets (	continued)	
3		the organization's acquisitions (check all that apply)	n, accession	, and other record	s, check	any of	the fo	ollowing that are	a significant u	ise of it	s collection	
а		Public exhibition			d		Loan	or exchange pro	grams			
b		Scholarly research			е		Othe	er				
С		Preservation for future gene	rations									
4	Provi	de a description of the organi	zatıon's coll	ections and explair	n how th	ey furth	ner th	e organization's e	exempt purpo	se in		
5	Durin	orri ng the year, did the organizati is to be sold to raise funds rat							mılar	□ <b>Y</b> €	es 🗆 N	n
Pa	rt IV	Escrow and Custodial Complete if the organiza X, line 21.			orm 990	), Part	IV, I	ine 9, or report	ed an amou			
1a		e organization an agent, trust ded on Form 990, Part X?	ee, custodia	an or other interme	ediary for	- contril	bution	ns or other assets	not	☐ Y	es 🗆 N	0
b	If "Y∈	es," explain the arrangement	ın Part XIII	and complete the	following	table			A	mount		_
С		nning balance			_			1c				_
d	_	nons during the year						1d				_
е		butions during the year						1e				_
f		ng balance						1f				_
<b>2</b> a		he organization include an am	ount on Fo	rm 990, Part X, line	e 21, for	escrow	or cu	ustodial account l	ıabılıty?		es 🗆 N	– o
b		es," explain the arrangement								_		
_	art V	Endowment Funds. Co										
				(a)Current year		rior yea		(c)Two years back			(e)Four year	s back
<b>1</b> a	Beginn	ning of year balance										
b	Contrib	outions										
С	Net inv	vestment earnings, gains, and	losses									
d	Grants	or scholarships										
е		expenditures for facilities ograms										
f	Admını	istrative expenses										
g	End of	year balance										
2 a	Board	de the estimated percentage d designated or quasi-endowr		nt year end baland	ce (line 1	g, colu	mn (a	)) held as				
b		anent endowment ▶										
С		porarily restricted endowment										
		percentages on lines 2a, 2b, a		•								
3a	orgar	here endowment funds not in nization by nrelated organizations	the posses	sion of the organiz	ation tha	tare h	eld ar	nd administered f	or the	<b>3</b>	Yes a(i)	No
ь	(ii) r		 organization	s listed as required	 I on Sche	 edule R	· .			3:	a(ii)	
4	Desci	ribe in Part XIII the intended	uses of the	organization's end	owment	funds						
Pa	rt VI	Land, Buildings, and I	quipmer	nt.								
		Complete if the organiza				•						
	Descri	iption of property (a	i) Cost or oth (investme		st or other	basis (d	other)	(c) Accumulated	depreciation	1	(d) Book valu	е
1a	Land											
b	Buildin	ngs										
С	Leaseh	nold improvements				1,96	51,536		356,643		1	,604,893
		nent				42	28,103		117,099			311,004
	Other						22,030		22,030			0
		lines 1a through 1e (Column	(d) must ed	ı Jual Form 990, Par	t X, colu				<b>&gt;</b>	-	1	,915,897

	(Form 990) 2018				Page <b>3</b>
Part VII	<b>Investments—Other Securities.</b> Complete if the organ See Form 990, Part X, line 12.	ınızat	ion answ	vered "Yes" on Form 9	90, Part IV, line 11b.
	(a) Description of security or category (including name of security)		(b) Book value	<b>(c)</b> Meth Cost or end-c	od of valuation f-year market value
	l derivatives				
(A)					
(B)					
(C)					•
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Colum Part VIII	In (b) must equal Form 990, Part X, col (B) line 12)  Investments—Program Related.  Complete if the organization answered 'Yes' on Form 99	<b>▶</b>	art IV Ju	ne 11c. See Form 990	Part X line 13
			ook value	(c) Meth	od of valuation if-year market value
(1)				Cost of end o	year market value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	nn (b) must equal Form 990, Part X, col (B) line 13 )				
Part IX	Other Assets. Complete if the organization answered 'Yes' of (a) Description	n Forr	m 990, Pa	rt IV, line 11d See Form	(b) Book value
	ES TO FIELD OFFICES E ADVANCES TO EMPLOYEES				718,189 262,835
(3) SECURIT (4)	TY DEPOSIT				343,400
(5)					
(6)					
(7)					
(8)					
(9)					
	ımn (b) must equal Form 990, Part X, col (B) line 15 )				1,324,424
Part X	<b>Other Liabilities.</b> Complete if the organization answere See Form 990, Part X, line 25.	ed 'Ye	es' on Fo	rm 990, Part IV, line 1	•
1.	(a) Description of liability		<b>(b)</b> B	ook value	_
	JCATION FUND			443,953	
(2)	SATION FOND			143,533	
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 25 )	<u> </u>		443,953	
	or uncertain tax positions In Part XIII, provide the text of the foo		to the or		ements that reports the

Part XI

2

3

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2018

Page 4

1,505,837

32,920,670

32,920,670

34,415,775

1,905,702

32,510,073

32.510.073

Schedule D (Form 990) 2018

Net unrealized gains (losses) on investments . . . . b e

Add lines **4a** and **4b** . . . . . .

b c 5

Part XII

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . . .

Add lines 2a through 2d . . . . . .

**Supplemental Information** 

1

4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b .

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional 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

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on line 1 but not on Form 990, Part IX, line 25

2a

2b

2c

2d

4a

4b

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2c

2d

4a

4b

Explanation

2a 2b

714,665

1,191,037

-420.008

1.191.037

734.808

2e

3

4c

5

2e 3

4c

5

Schedule D (Form 990) 2018	Page <b>5</b>
Part XIII Supplemental Info	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

# Additional Data

Software Version: **EIN:** 52-1984713

N WHICH THE CENTER FILES RETURNS

CODIFICA

Name: AMERICAN CENTER FOR INTERNATIONAL LABOR

SOLIDARITY

SOLIDARITY CENTER IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(5) OF THE INTER

Supplemental Information Return Reference

PART X, LINE 2

Explanation

Software ID:

NAL REVENUE CODE, EXCEPT ON NET INCOME, IF ANY, FROM UNRELATED BUSINESS ACTIVITIES SOLIDA RITY CENTER ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE ACCOUNTING STANDARDS. TION (ASC) TOPIC INCOME TAXES THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUN TING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PR ESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POS ITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE CENTER PERFORMED AN EVALUATION O F UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2018 AND 2017, AND DETERMINED T HAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR TH AT MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS AS OF DECEMBER 31, 2018, THE STATUE OF LIM ITATIONS FOR TAX YEARS 2015 THROUGH 2017 REMAINS OPEN WITH THE U.S. FEDERAL JURISDICTION I

Supplemental Information						
Return Reference	Explanation					
PART XI, LINE 2D - OTHER ADJUSTMENTS	REVENUE OF RELATED ORGANIZATION 734,808					

S

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENSES OF RELATED ORGANIZATION 714,665

Sı

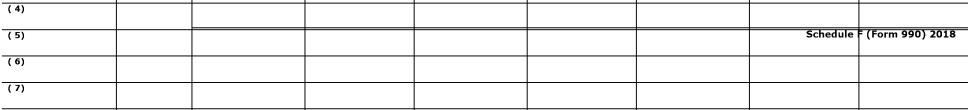
efile GRAPHIC print	t - DO NOT PROCESS	As Filed Data	-	DLN	93493322004299				
SCHEDULE F (Form 990)	Statement o	of Activities	Outside the Uni	ited States	OMB No 1545-0047				
(1 0 1 1 1 0 0 0 )	► Complete if the or	-	'Yes" to Form 990, Part IV, I to Form 990.	ıne 14b, 15, or 16.	2018				
Department of the Treasury Internal Revenue Service	► Go to www	.irs.gov/Form990 for	/Form990 for instructions and the latest information.  Open to Pul Inspection						
Name of the organization AMERICAN CENTER FOR 1				Employer ider	ntification number				
SOLIDARITY	INTERNATIONAL LABOR			52-1984713	.3				
	<b>Information on Activi</b> Part IV, line 14b.	ties Outside the	United States. Comple	ete if the organization a	inswered "Yes" to				
other assistance, to award the gran	the grantees' eligibility for its or assistance? <b>s.</b> Describe in Part V the	or the grants or ass	e substantiate the amount istance, and the selection edures for monitoring the	criteria used	✓ Yes □ No her assistance				
3 Activites per Region	n (The following Part I, lin	e 3 table can be dup	licated if additional space is	needed )					
(a) Region	<b>(b)</b> Numbe offices in t region		s, region (by type) (e g ,	(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 b Total from continual Part I	tion sheets to	23 14	2		17,017,600 350,524				
c Totals (add lines 3a	a and 3b)  Act Notice, see the Instru	24 14		No 50082W Schedu	17,368,124 le F (Form 990) 2018				

3 Enter total number of other organizations or entities .

75

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	<b>(f)</b> 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)								

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.



(5)				(*
( 6)				
(7)				
(8)				
(9)				
( 10)				
( 11)				

(8)				
(9)				
( 10)				
( 11)				
( 12)				
( 13)				
( 14)				
( 15)				

( 12)				
( 13)				
( 14)				
( 15)				
( 16)				

( 1:	o)				<u> </u>
( 10	5)				
		organizations listed a i the grantee or coun			0

(16)

(17) (18) Page 3

Schedule F (Form 990) 2018

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)

(5)				
( 6)				
(7)				
(8)				
(9)				
(10)				
(11)				
( 12)				
( 13)				
(14)				

(7)				
(8)				
(9)				
( 10)				
(11)				
( 12)				
( 13)				
( 14)				
( 15)				

Sche	dule F (Form 990) 2018		Page <b>4</b>
Par	t 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	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)		
		☐ Yes	<b>✓</b> 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)		
	Corporations (see Instructions for Form 5471)	☐ Yes	<b>✓</b> 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	<b>✓</b> 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)		
	(see Instructions for Form 6005)	☐ Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713, don't file with Form 990)	☐ Yes	<b>✓</b> No

chedule F (F	Form 990) 2018 Page <b>5</b>
	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).
Return Reference	ule F, Supplemental Information  Explanation
1 IXCICICIICC	

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 SUBRECIPIENTS BY OUR FIELD OFFICES WITH THE TERMS AND CONDITIONS IN WHICH THE SUBGRANTEE MUST COMPLY WITH ALL DISBURSEMENTS PAID BY THE SUBGRANTEES 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

### Additional Data

(a) Region

EAST ASIA AND THE PACIFIC

## Software ID: Software Version:

**EIN:** 52-1984713

Name: AMERICAN CENTER FOR INTERNATIONAL LABOR

SUPPORTED TRADE

DEMOCRACIES

UNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING 3,515,462

**SOLIDARITY** 

(b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures

Form 990	Schedule F	Dart T	- Activities	Outside	The United	States

	offices in the region	employees or agents in region	in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	is a program service, describe specific type of service(s) in region	for region
CENTRAL AMERICA	3	6	PROGRAM SERVICES	SUPPORTED TRADE UNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING DEMOCRACIES	1,398,695

34 PROGRAM SERVICES

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		
MIDDLE EAST AND NORTH AFRICA	2	11		SUPPORTED TRADE UNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING DEMOCRACIES	1,860,510		
NORTH AMERICA	1	7		SUPPORTED TRADE UNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING DEMOCRACIES	832,415		

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (b) Number of (c) Number of offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region services, grants to region recipients located in the region) 8 PROGRAM SERVICES SUPPORTED TRADE 1.564.429 SOUTH AMERICA IUNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING DEMOCRACIES 42 PROGRAM SERVICES SUPPORTED TRADE 2,336,129 SOUTH ASIA IUNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING IDEMOCRACIES

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	5	22		SUPPORTED TRADE UNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING DEMOCRACIES	3,636,549			
RUSSIA AND NEIGHBORING STATES	3	12		SUPPORTED TRADE UNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING DEMOCRACIES	1,873,411			

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		
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	1	1		SUPPORTED TRADE UNIONS AND TRAINED MEMBERS AND LEADERS OVERSEAS IN EMERGING DEMOCRACIES	350,524		

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (f) Manner of (d) Purpose of (e) Amount of (a) Name of section (c) Region cash organization and EIN(If grant cash grant disbursement applicable) TCENTE AL E 102 WIDE TRANCEER LENDANCE THE

AMERICA	PROSPERITY, DIGNITY AND QUALITY OF LIFE FOR WORKING PEOPLE	5,103	WIRE TRANSFER	
CENTRAL AMERICA	PROMOTE A CULTURE OF COMPLIANCE WITH LABOR RIGHTS FOR APPAREL SECTOR WORKERS AND DOMESTIC WORKERS THROUGH WORKER OUTREACH LABOR	22,867	WIRE TRANSFER	

JOUTREACH, LABOR RIGHTS EDUCATION, ORGANIZATIONAL STRENGTHENING, IAND ADVOCACY ENGAGEMENT

(ı) Method of

valuation

(book, FMV,

appraisal,

other)

(h) Description

non-cash

assistance

(g) Amount of

non-cash

assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If organization grant cash grant non-cash assistance disbursement appraisal, applicable) assistance other) PROMOTE A 53,117 WIRE TRANSFER CENTRAL AMERICA CULTURE OF COMPLIANCE WITH LABOR RIGHTS FOR APPAREL SECTOR WORKERS AND IDOMESTIC IWORKERS. THROUGH WORKER OUTREACH, LABOR RIGHTS EDUCATION, lorganizational . STRENGTHENING. IAND ADVOCACY IENGAGEMENT CENTRAL SUPPORT FOR 9,413 WIRE TRANSFER AMERICA CENTRAL AMERICAN UNIONS IN THE BANANA

AND AGRICULTURE

SECTOR

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region book, FMV, cash non-cash organization and EIN(ıf cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) CENTRAL SUPPORT FOR 7,123 WIRE TRANSFER IAMERICA CENTRAL IAMERICAN UNIONS IN THE IBANANA AND AGRICULTURE SECTOR CENTRAL SUPPORT FOR 12,325 WIRE TRANSFER AMERICA CENTRAL AMERICAN UNIONS IN THE BANANA AND AGRICULTURE

SECTOR

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region cash non-cash (book, FMV. and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL PROMOTE A 5,019 WIRE TRANSFER AMERICA CULTURE OF COMPLIANCE WITH LABOR RIGHTS FOR DOMESTIC WORKERS THROUGH WORKER OUTREACH, LABOR RIGHTS EDUCATION. lorganizational . STRENGTHENING. IAND ADVOCACY IENGAGEMENT. CENTRAL PROMOTE A 50,045 WIRE TRANSFER AMERICA CULTURE OF COMPLIANCE WITH LABOR RIGHTS FOR APPAREL SECTOR WORKERS AND DOMESTIC WORKERS THROUGH WORKER OUTREACH, LABOR IRIGHTS EDUCATION, ORGANIZATIONAL STRENGTHENING. IAND ADVOCACY

ENGAGEMENT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (a) Amount of valuation (a) Name of section (e) Amount of (c) Region (d) Purpose of grant non-cash (book, FMV, cash organization and EIN(If cash grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL WIRE TRANSFER IPROMOTE A 13,297 AMERICA CULTURE OF COMPLIANCE WITH LABOR RIGHTS FOR APPAREL SECTOR WORKERS AND DOMESTIC WORKERS THROUGH WORKER OUTREACH, LABOR RIGHTS EDUCATION. ORGANIZATIONAL STRENGTHENING. IAND ADVOCACY ENGAGEMENT CENTRAL 13,725 WIRE TRANSFER STRENGTHEN THE AMERICA ORGANIZING, IRIGHTS EDUCATION, AND REPRESENTATION CAPACITY OF AERONAUTICAL TRANSPORTATION lunions in El ISALVADOR WITH SUBCONTRACTED WORKERS IN THE SECTOR

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of section (e) Amount of (d) Purpose of grant (c) Region cash non-cash (book, FMV. and EIN(If cash grant organization non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL STRENGTHEN THE 16,759 WIRE TRANSFER AMERICA ORGANIZING. RIGHTS EDUCATION, AND REPRESENTATION CAPACITY OF AERONAUTICAL TRANSPORTATION lunions in el SALVADOR WITH SUBCONTRACTED WORKERS IN THE SECTOR CENTRAL STRENGTHEN THE 20,981 WIRE TRANSFER AMERICA ORGANIZING, IRIGHTS EDUCATION, AND REPRESENTATION CAPACITY OF **IAERONAUTICAL** TRANSPORTATION lunions in El SALVADOR WITH SUBCONTRACTED WORKERS IN THE SECTOR

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of section (e) Amount of (d) Purpose of grant (c) Region cash non-cash (book, FMV. and EIN(If cash grant organization non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL STRENGTHEN THE 8,486 WIRE TRANSFER AMERICA ORGANIZING. RIGHTS EDUCATION, AND REPRESENTATION CAPACITY OF AERONAUTICAL TRANSPORTATION lunions in el SALVADOR WITH SUBCONTRACTED WORKERS IN THE SECTOR CENTRAL STRENGTHEN THE 15,233 WIRE TRANSFER AMERICA ORGANIZING, IRIGHTS EDUCATION, AND REPRESENTATION CAPACITY OF **IAERONAUTICAL** TRANSPORTATION lunions in El SALVADOR WITH SUBCONTRACTED WORKERS IN THE SECTOR

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of ٥f (c) Region cash non-cash (book, FMV. and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL BUILD THE 12,589 WIRE TRANSFER AMERICA CAPACITY OF TRADE UNIONS IN CENTRAL AMERICA AND SOUTHERN AFRICA TO PROMOTE AND PROTECT THE IFUNDAMENTAL LABOR RIGHTS OF MIGRANT WORKERS EAST ASIA STRENGTHEN THE 5,440 WIRE TRANSFER AND THE CAPACITY OF PACIFIC HOTEL SECTOR TRADE UNIONS AT THE NATIONAL AND LOCAL LEVEL WITH AN

EMPHASIS ON GENDER EQUALITY

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of l(b) IRS codel (h) Description (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA STRENGTHEN THE 12,075 WIRE TRANSFER AND THE CAPACITY OF PACIFIC HOTEL SECTOR TRADE UNIONS AT THE NATIONAL AND LOCAL LEVEL WITH AN EMPHASIS ON GENDER EOUALITY EAST ASIA STRENGTHEN THE 81,165 WIRE TRANSFER AND THE CAPACITY OF PACIFIC IGRASS ROOTS WORKERS AND INDEPENDENT WORKER RIGHTS IADVOCATES TO PROMOTE LABOR LAW ENFORCEMENT AND ADVOCATE lFOR. STRENGTHENED WORKER RIGHTS AND REMEDIES

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of of (book, FMV, (c) Region cash non-cash and EIN(If cash grant organization grant non-cash assistance disbursement appraisal, applicable) assistance other) EAST ASIA STRENGTHEN THE 145,394 WIRE TRANSFER AND THE CAPACITY OF PACIFIC GRASS ROOTS WORKERS AND INDEPENDENT WORKER RIGHTS ADVOCATES TO PROMOTE LABOR LAW ENFORCEMENT AND ADVOCATE FOR STRENGTHENED WORKER RIGHTS AND REMEDIES WIRE TRANSFER EAST ASIA STRENGTHEN THE 12.430 AND THE CAPACITY OF PACIFIC WORKERS, LEGAL PRACTITIONERS. SCHOLARS AND ACTIVISTS TO REDRESS VIOLATIONS OF WORKER RIGHTS AND PROMOTE LABOR LAW REFORMS IN THE

REGION

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation section (d) Purpose of (e) Amount of (a) Name of (c) Region cash non-cash (book, FMV, and EIN(ıf organization grant cash grant non-cash assistance disbursement appraisal, applicable) assistance other) EAST ASIA STRENGTHEN THE 34,725 WIRE TRANSFER AND THE CAPACITY OF PACIFIC WORKERS, LEGAL PRACTITIONERS, SCHOLARS AND ACTIVISTS TO REDRESS VIOLATIONS OF WORKER RIGHTS AND PROMOTE LABOR LAW REFORMS IN THE REGION EAST ASIA STRENGTHEN THE 22,123 WIRE TRANSFER AND THE CAPACITY OF PACIFIC NATIONAL AND REGIONAL OSH NETWORKS TO ADVANCE OCCUPATIONAL SAFETY AND

HEALTH RIGHTS IN

lasia

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section Ωf (c) Region book, FMV. cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA 90,769 STRENGTHEN THE WIRE TRANSFER AND THE CAPACITY OF PACIFIC NATIONAL AND REGIONAL OSH NETWORKS TO IADVANCE OCCUPATIONAL SAFETY AND HEALTH RIGHTS IIN ASIA EAST ASIA RAISE PUBLIC 155,129 WIRE TRANSFER AND THE AWARENESS AND PACIFIC IPROMOTE IPARTICIPATION | OF UNION MEMBERS AND WORKING FAMILY COMMUNITIES ON WORKER RIGHTS

ISSUES

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region cash (book, FMV, non-cash and EIN(if cash grant non-cash organization grant disbursement assistance appraisal, applicable) assistance other) EAST ASIA ENHANCE THE 76,896 WIRE TRANSFER AND THE ABILITY OF PACIFIC HKCTU AFFILIATES TO ORGANIZE. NEGOTIATE AND ADVOCATE FOR IBETTER IPROTECTIONS | FOR WORKERS EAST ASIA BUILD THE 68,037 WIRE TRANSFER AND THE CAPACITY OF PACIFIC LABOR SCHOLARS AND WORKER RIGHTS ADVOCATES TO PROMOTE LABOR

LAW REFORMS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation section (d) Purpose of (e) Amount of (a) Name of οf (c) Region cash (book, FMV, non-cash organization and EIN(If grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA **BUILD THE** 68,905 WIRE TRANSFER AND THE CAPACITY OF PACIFIC LABOR SCHOLARS AND WORKER RIGHTS ADVOCATES TO PROMOTE LABOR LAW REFORMS EAST ASIA BUILD THE 18,683 WIRE TRANSFER AND THE CAPACITY OF PACIFIC LABOR SCHOLARS AND WORKER RIGHTS ADVOCATES TO PROMOTE LABOR LAW

REFORMS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) EAST ASIA 24,050 WIRE TRANSFER RAISE WORKERS AND THE RIGHTS PACIFIC IAWARENESS AND STRENGTHEN THE CAPACITY OF GRASS ROOTS WORKER RIGHTS ADVOCATES TO PROMOTE BETTER ENFORCEMENT OF LABOR LAWS EAST ASIA 7,375 WIRE TRANSFER RAISE WORKERS AND THE RIGHTS PACIFIC AWARENESS AND STRENGTHEN THE CAPACITY OF IGRASS ROOTS WORKER RIGHTS ADVOCATES TO PROMOTE BETTER ENFORCEMENT OF LABOR LAWS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA 42,988 WIRE TRANSFER RAISE WORKERS AND THE IRIGHTS PACIFIC AWARENESS AND STRENGTHEN THE CAPACITY OF GRASS ROOTS WORKER RIGHTS ADVOCATES TO PROMOTE BETTER ENFORCEMENT OF LABOR LAWS EAST ASIA BUILD THE 46,220 WIRE TRANSFER AND THE CAPACITY OF PACIFIC lworker. ACTIVISTS, OSH VICTIMS AND LEGAL IPRACTITIONERS. TO PROMOTE BETTER ENFORCEMENT OF OSH LAWS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section οf (c) Region cash non-cash (book, FMV, organization and EIN(If grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA PROTECT AND 6,300 WIRE TRANSFER AND THE DEFEND THE PACIFIC RIGHTS OF MIGRANT WORKERS, AND PROVIDE LEGAL ADVOCACY EAST ASIA **IPROTECT** 93,407 WIRE TRANSFER AND THE MIGRANT PACIFIC WORKERS FROM LABOR RIGHTS ABUSES AND FORCED LABOR AND ENSURE ACCESS TO JUSTICE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of l (c) Region non-cash (book, FMV, cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA PROTECT 43,365 WIRE TRANSFER AND THE MIGRANT PACIFIC WORKERS FROM LABOR RIGHTS ABUSES AND FORCED LABOR AND ENSURE ACCESS TO JUSTICE EAST ASIA 42,821 WIRE TRANSFER PROTECT AND THE MIGRANT PACIFIC WORKERS FROM LABOR RIGHTS ABUSES AND FORCED LABOR AND ENSURE ACCESS TO JUSTICE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA BUILD THEIR 6.636 WIRE TRANSFER AND THE CAPACITY TO PACIFIC RECRUIT AND REPRESENT MEMBERS EAST ASIA STRENGTHEN 6.708 WIRE TRANSFER AND THE THE CAPACITY PACIFIC OF HOTEL SECTOR TRADE UNIONS AT THE NATIONAL AND LOCAL LEVEL WITH AN EMPHASIS ON

GENDER EQUALITY

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST BULDING 45,475 WIRE TRANSFER IAND NORTH CAPACITY FOR AFRICA TRIPARTITE DIALOQUE MIDDLE EAST 5.131 WIRE TRANSFER BULDING AND NORTH CAPACITY FOR IAFRICA TRIPARTITE DIALOOUE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (a) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of of (c) Region cash non-cash (book, FMV, organization and EIN(If grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST IMPLEMENT ALL 48,047 WIRE TRANSFER AND NORTH IPROGRAM . AFRICA ACTIVITIES ON THE GROUND. lusing local COORDINATORS AND A TRAINER THAT HAS WORKED EXTENSIVELY WITH THE SC THROUGHOUT THE REGION AND IS FAMILIAR WITH SCS TRAINING MATERIALS AND SKILLED IN POPULAR EDUCATION METHODOLOGY MIDDLE EAST STRENGTHEN THE 12,411 WIRE TRANSFER AND NORTH CAPACITY OF AFRICA UNIONS IN THE MENA REGION TO DEFEND THE RIGHTS OF WORKERS AND IMPROVE WORKING CONDITIONS IN THE SUPPLY CHAINS OF MULTINATIONAL CORPORATIONS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If grant cash grant organization non-cash disbursement assistance appraisal, applicable) assistance other) 7,509 WIRE TRANSFER NORTH ENHANCE THE AMERICA IPROSPERITY. DIGNITY AND OUALITY OF LIFE IFOR WORKING PEOPLE INORTH ENHANCE THE 12.353 WIRE TRANSFER IAMERICA PROSPERITY, DIGNITY AND OUALITY OF LIFE IFOR WORKING PEOPLE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If grant cash grant organization non-cash disbursement assistance appraisal, applicable) assistance other) 5,714 WIRE TRANSFER NORTH ENHANCE THE AMERICA IPROSPERITY. DIGNITY AND OUALITY OF LIFE IFOR WORKING PEOPLE INORTH ENHANCE THE 30.831 WIRE TRANSFER IAMERICA PROSPERITY, DIGNITY AND OUALITY OF LIFE IFOR WORKING PEOPLE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If grant cash grant organization non-cash disbursement assistance appraisal, applicable) assistance other) NORTH ENHANCE THE 18,477 WIRE TRANSFER AMERICA IPROSPERITY. DIGNITY AND OUALITY OF LIFE IFOR WORKING PEOPLE INORTH ENHANCE THE 10.447 WIRE TRANSFER IAMERICA PROSPERITY, DIGNITY AND OUALITY OF LIFE IFOR WORKING PEOPLE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (a) Name of section (e) Amount of (c) Region cash non-cash (book, FMV, organization and EIN(If grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) NORTH STRENGTHEN THE 69,139 WIRE TRANSFER AMERICA ABILITY OF WORKERS ORGANIZATIONS TO ATTAIN AND DEFEND THE DOMESTIC AND INTERNATIONAL LABOR RIGHTS OF **AGRICULTURAL** WORKERS IN lMEXICO. NORTH CONTINUE TO 42,634 WIRE TRANSFER AMERICA IPROMOTE: EMPLOYER ACCOUNTABILITY AND GOVERNMENT

TRANSPARENCY

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) NORTH CONTINUE TO 28,234 WIRE TRANSFER AMERICA IPROMOTE IEMPLOYER. IACCOUNTABILITY IAND GOVERNMENT TRANSPARENCY INORTH CONTINUE TO 23.569 WIRE TRANSFER AMERICA IPROMOTE: EMPLOYER IACCOUNTABILITY IAND GOVERNMENT TRANSPARENCY

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) 38,169 WIRE TRANSFER SOUTH ASIA PROMOTING RIGHTS AND INTERESTS IN TARGETED IGARMENT COMMUNITIES SOUTH ASIA BUILD THE 24,500 WIRE TRANSFER CAPACITY OF GARMENT WORKER UNIONS TO UTILIZE THE 2018 ACCORDS FREEDOM OF ASSOCIATION (FOA) COMPLAINT MECHANISM TO REPORT RIGHTS

VIOLATIONS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region cash non-cash (book, FMV, and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) SOUTH ASIA PROGRAM WILL 43,964 WIRE TRANSFER PROMOTE DECENT AND SAFE EMPLOYMENT PRACTICES FOR JOURNALISTS AND MEDIA WORKERS IN PAKISTAN BY STRENGTHENING THEIR TRADE UNIONS AND ASSOCIATIONS SOUTH ASIA 19,709 WIRE TRANSFER PROGRAM WILL PROMOTE DECENT AND SAFE **EMPLOYMENT** IPRACTICES FOR JOURNALISTS AND MEDIA WORKERS IN PAKISTAN BY STRENGTHENING THEIR TRADE UNIONS AND lassociations.

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of of (c) Region cash non-cash (book, FMV, and EIN(If cash grant organization grant non-cash assistance disbursement appraisal, applicable) assistance other) SOUTH ASIA PROGRAM WILL 11,462 WIRE TRANSFER PROMOTE DECENT AND SAFE **IEMPLOYMENT** PRACTICES FOR JOURNALISTS AND MEDIA WORKERS IN PAKISTAN BY STRENGTHENING THEIR TRADE UNIONS AND ASSOCIATIONS SOUTH ASIA STRENGTHEN THE 5,000 WIRE TRANSFER CAPACITY OF WORKER RIGHTS DEFENDERS ACROSS BORDERS TO PROMOTE THE RIGHTS OF MIGRANT WORKERS AT ALL ISTAGES OF THE IMIGRATION PROCESS AND ADVANCE THEIR ACCESS TO DEMOCRATIC

INORMS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of of (c) Region non-cash (book, FMV, cash organization and EIN(If arant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN EXPAND 12,000 WIRE TRANSFER AFRICA ADVOCACY TO COMBAT IFF BY SUPPORTING TRADE UNION CAMPAIGNS IN AT LEAST THREE COUNTRIES, AND BROADENING AWARENESS-RAISING EFFORTS TO TARGET YOUTH AND WOMEN SUB-SAHARAN PROVIDE 6,500 WIRE TRANSFER AFRICA SUPPORT FOR AGRICULTURE ARGO-PROCESSING INDUSTRIAL UNION OF LIBERIA (AAIWUL) TO CONDUCT A PRE-BARGAINING SURVEY OF WORKERS AT THE FIRESTONE PLANTATION

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash (book, FMV, non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN ISTRENGTHEN 35,377 WIRE TRANSFER AFRICA CETUS BRANCH-LEVEL CAPACITY TO IMPLEMENT MEMBER OUTREACH PROGRAMS AND INNOVATIVE ORGANIZING IN THE. CONSTRUCTION. AGRICULTURE AND TEXTILES SECTORS SUB-SAHARAN PROMOTE 21,890 WIRE TRANSFER AFRICA INCLUSION OF IWOMEN AND ADVANCEMENT OF

GENDER EQUALITY

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of l(b) IRS codel (h) Description (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region cash non-cash (book, FMV, and EIN(if cash grant non-cash organization grant disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN IEDUCATE, TRAIN, 12,000 WIRE TRANSFER IAFRICA IAND RAISE THE CONSCIOUSNESS OF INDIVIDUALS WITHIN THE ZCTU MEMBERSHIP AREAS SUB-SAHARAN EDUCATE, TRAIN, 22.748 WIRE TRANSFER **IAFRICA** AND RAISE THE CONSCIOUSNESS OF INDIVIDUALS WITHIN THE ZCTU MEMBERSHIP IAREAS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN EDUCATE, TRAIN, 8,275 WIRE TRANSFER IAFRICA AND RAISE THE CONSCIOUSNESS OF INDIVIDUALS WITHIN THE ZCTU MEMBERSHIP AREAS ISUB-SAHARAN IEXPAND 27,000 WIRE TRANSFER AFRICA ADVOCACY TO COMBAT IFF BY SUPPORTING TRADE UNION CAMPAIGNS IN AT LEAST THREE COUNTRIES, AND BROADENING IAWARENESS-RAISING EFFORTS TO TARGET YOUTH

AND WOMEN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of of (c) Region cash non-cash (book, FMV, and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN EXPAND 12,000 WIRE TRANSFER AFRICA ADVOCACY TO COMBAT IFF BY SUPPORTING TRADE UNION CAMPAIGNS IN AT LEAST THREE COUNTRIES, AND BROADENING AWARENESS-RAISING EFFORTS TO TARGET YOUTH AND WOMEN SUB-SAHARAN EXPAND 12,000 WIRE TRANSFER AFRICA ADVOCACY TO COMBAT IFF BY SUPPORTING TRADE UNION CAMPAIGNS IN AT LEAST THREE COUNTRIES, AND BROADENING AWARENESS-RAISING EFFORTS TO TARGET YOUTH AND WOMEN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN DEVELOP A 27,507 WIRE TRANSFER AFRICA STRATEGIC ALLIANCE WITH NATIONAL CENTERS THROUGHOUT THE SOUTHERN AFRICA 69,445 WIRE TRANSFER SUB-SAHARAN **BUILD THE** AFRICA CAPACITY OF TRADE UNIONS WITHIN THE AFRICA MIGRATION TRADE UNION NETWORK TO IPROMOTE AND PROTECT THE IFUNDAMENTAL LABOR RIGHTS OF MIGRANT WORKERS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of grant (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN IENHANCE THE 5,138 WIRE TRANSFER AFRICA PROSPERITY, DIGNITY AND QUALITY OF LIFE IFOR WORKING PEOPLE SUB-SAHARAN SHARE UPDATES ON 21.310 WIRE TRANSFER COUNTRY/REGIONAL AFRICA EXPERIENCES AND DEVELOPMENTS ON THE ACCESSIBILITY AND PORTABILITY OF SOCIAL SECURITY BENEFITS

(ı) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region non-cash book, FMV, cash and EIN(If cash grant organization grant non-cash assistance appraisal, disbursement applicable) assistance other) RUSSIA AND THE WIRE TRANSFER STREGTHEN THE 40,350 NEWLY CAPACITY OF INDEPENDENT PUBLIC SECTOR STATES TRADE UNIONS TO PROTECT MEMBERS FUNDAMENTAL IRIGHTS AT WORK I

		The state of the s			
	INDEPENDENT STATES	BUILD THE CAPACITY OF THE ORGANIZATION AND ITS AFFILIATES TO CONDUCT TRAINING FOR FREEDOM OF ASSOCIATION AND SOCIAL POLICY ADVOCACY	WIRE TRANSFER		

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

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (g) Amount of (h) Description ( (b) IRS code (f) Manner of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization arant non-cash disbursement assistance appraisal. applicable) assistance other) 90,646 WIRE TRANSFER IRUSSIA AND THE IBUILD THE INEWLY CAPACITY OF THE INDEPENDENT ORGANIZATION ISTATES IAND ITS AFFILIATES TO IPROTECT THE RIGHTS TO

IFREEDOM OF IPOLICY

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Note: To capture the full o	ontent of this d	ocument, please sel	lect landscape mode	e (11" x 8.5") whe	en printing.		•	OMB No 1545-0047	
Schedule I (Form 990)	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.								
Department of the Treasury Internal Revenue Service	► Go to <u>www.irs.qov/Form990</u> for the latest information.								
Name of the organization AMERICAN CENTER FOR INTERNA SOLIDARITY	ATIONAL LABOR	and Assistance					yer identific 184713	cation number	
<ol> <li>Does the organization main the selection criteria used</li> <li>Describe in Part IV the org</li> </ol>	to award the grants Janization's procedur	or assistance? es for monitoring the use	e of grant funds in the Ur	ited States	for the grants or assistance	,	Part IV, line	✓ Yes No	
		can be duplicated if add (c) IRC section (if applicable)		(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descri noncash as	ption of	(h) Purpose of grant or assistance	
(1) INTERNATIONAL CENTER FOR RESEARCH ON WOMEN 1120 20TH STREET NW SUITE 500N WASHINGTON, DC 20036	52-1081455	501(C)(3)	26,747					CAPTURING THE BENEFITS OF GENDER EQUALITY IN GLOBAL VALUE CHAINS A PARTICIPATORY MEASUREMENT TOOL FOR WORKERS	
<ul><li>2 Enter total number of sect</li><li>3 Enter total number of other</li></ul>		-				· · · ·	. •	1 0	
For Paperwork Reduction Act Note	ce. see the Instruction	ns for Form 990.		Cat No 50055	5P		Sch	edule I (Form 990) 2018	

Part III can be		<del></del>		(1) (	La Sala III de la Junta de la	(C) D
(a) Type of grant or	assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
)						
)						
3)						
1)						
5)						
)						
')						
Part IV Suppleme	ental Informat	ion. Provide the inf	ormation required in	Part I, line 2; Part III	, column (b); and any other add	ditional information.
eturn Reference	Explanat	ion				
ART I, LINE 2	ORGANIZA REQUIREM CENTER'S	TIONS THE AGREEMI ENTS ON HOW TO AC GRANT AGREEMENT A	ENTS SPECIFY THE TERI COUNT FOR THE FUNDS ALSO FLOW DOWN TO T	MS, THE BUDGET AMOUN G GIVEN TO THE PARTNE HE CENTER'S SUBRECIPI	IT AND PERIOD, THE SCOPE OF WOF R'S ORGANIZATIONS ANY OTHER T ENTS (PARTNERS) PARTNERS ARE	ENTS THE CENTER ISSUES TO OUR PARTNER'S RK, THE NARRATIVE AND FINANCIAL REPORT ERMS AND CONDITIONS SPECIFIED IN THE RESPONSIBLE FOR MONITORING AND

ACCOUNTED FOR AND SUPPORTED BY LEGITIMATE RECEIPTS IN ORDER FOR THE EXPENSES TO BE ACCEPTED BY THE SOLIDARITY CENTER. THE RECEIPTS SUBMITTED BY THE GRANTEES ARE AUDITED BY OUR FINANCIAL STAFF THE CENTER ALSO REQUIRES SUBRECIPIENTS TO SUBMIT A-133 AUIDT REPORTS WHEN

APPLICABLE TO THE GRANTEES

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Sch	nedule J	Cor	npensat	ion Information	40	1B No	1545-0	0047			
(For	m 990)	For certain Officers ▶ Complete if the organ	20								
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov</u> /	<u>/Form990</u> for	instructions and the latest inform	mation.		pen to Public Inspection				
Nar	ne of the organiza				Employer identificat						
	ERICAN CENTER FOR IDARITY	INTERNATIONAL LABOR			52-1984713						
Pa	rt I Questi	ons Regarding Compensation	on								
	<del></del>						Yes	No			
1a				f the following to or for a person liste by relevant information regarding the							
	First-class	s or charter travel	<b>✓</b>	Housing allowance or residence for	personal use						
	_	companions		Payments for business use of perso							
		nification and gross-up payments	<b>⊻</b>	Health or social club dues or initiation							
	☐ Discretion	nary spending account	Ц	Personal services (e g , maid, chauf	rreur, cher)						
b		xes in line 1a are checked, did the all of the expenses described above		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	1b	Yes				
2				or allowing expenses incurred by all	- 1-2	2	Yes				
	directors, truste	es, officers, including the CEO/Exe	ecutive Directo	r, regarding the items checked in line	e la'						
3	organization's C	EO/Executive Director Check all t	hat apply Dor	ed to establish the compensation of the not check any boxes for methods CEO/Executive Director, but explain							
	☐ Compensa	ation committee	$\checkmark$	Written employment contract							
		ent compensation consultant		Compensation survey or study							
	☐ Form 990	of other organizations	✓	Approval by the board or compensa	ition committee						
4	During the year related organiza		0, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a						
а	Receive a sever	ance payment or change-of-contro	ol payment?			4a	Yes				
b		r receive payment from, a supplen		ified retirement plan?		4b	Yes				
c	Participate in, o	r receive payment from, an equity	-based comper	nsation arrangement?		4c		No			
	If "Yes" to any o	of lines 4a-c, list the persons and p	provide the app	plicable amounts for each item in Par	t III						
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) o	rganizations	must complete lines 5-9.							
5		ed on Form 990, Part VII, Section a ontingent on the revenues of		the organization pay or accrue any							
а	The organization	n?				5a					
b	Any related orga					5b					
	•	5a or 5b, describe in Part III									
6		ed on Form 990, Part VII, Section a ontingent on the net earnings of	A, line 1a, did	the organization pay or accrue any							
а	The organization					<b>6</b> a					
b	Any related orga					<b>6</b> b					
_	•	6a or 6b, describe in Part III	A long 4	All	j.						
7		rsons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed nts not described in lines 5 and 6? If "Yes," describe in Part III									
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8					
9	If "Yes" on line 5 53 4958-6(c)?	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9					
For F	Paperwork Redu	ction Act Notice, see the Instr	uctions for Fo	orm 990. Cat No 5	50053T Schedule J	(Form	1990)	2018			

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. the individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

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) Break	kdown of W-2 and/o compensation	or 1099-MISC	(C) Retirement and other deferred	(D) Nontaxable benefits	columns	(F) Compensation in			
	(i) Base compensation	Bensation Bonus & incentive compensation (iii) (iii) Other reportable compensation				(B)(ı)-(D)	column (B) reported as deferred on prior Form 990			
See Additional Data Table										

Schedule J (Form 990) 2018									
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 AND EDUCATION EXPENSES FOR ALL OF OUR EXPATS OVERSEAS THE BENEFITS ARE CONSIDERED TAXABLE BENEFITS TO								

OUR EXPATS STAFF AND REPORTED ON THEIR W-2 SOLIDARITY CENTER PAYS EACH EMPLOYEE \$200 PER YEAR FOR HEALTH ENHANCEMENT EXPENSES

Return Reference	Explanation
TI A	PART I, LINE 4A DURING 2018, SAMANTHA TATE, CPD/PROGRAM OFFICER, RECEIVED A SEVERANCE PAYMENT TOTALING \$55,414 PART I, LINE 4B CERTAIN FRUSTEES WHO ARE ALSO OFFICERS OF THE AFL-CIO, A RELATED ORGANIZATION, PARTICIPATE IN A SUPPLEMENTAL NONQUALIFIED DEFERRED COMPENSATION ARRANGEMENT OF THE AFL-CIO DURING 2018, RICHARD TRUMKA AND ELIZABETH SHULER PARTICIPATED IN SUCH PLAN BUT DID NOT RECEIVE ANY PAYMENTS FROM THE PLAN

2018 Schedule 1

RICHARD TRUMKA

TEFERE GEBRE

ELIZABETH SHULER SECRETARY - TREASURER

SHAWNA BADER BLAU

EXECUTIVE DIRECTOR

DIRECTOR OF FINANCE

LYSTIA SANTOSA

HANAD MOHAMMAD

COUNTRY PROGRAM DIRECTOR

HIND CHERROUK

REGIONAL PROGRAM DIRECTOR ALONZO SUSON

COUNTRY PROGRAM DIRECTOR

ROBERT PAJKOVSKI

COUNTRY PROGRAM DIRECTOR SAMANTHA TATE

CPD/PROGRAM OFFICER

VICE CHAIR

CHAIR

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	(D) Nontaxable	(E) Total of columns	(F) Compensation in					

(iii)

Other reportable

compensation

12,209

2,850

2,850

152,266

52,587

42,966

60,435

60,221

other deferred

compensation

69,424

60,939

60,939

36,501

32,094

28,114

28,937

26,456

26,390

25,838

(B)(i)-(D)

378,651

323,989

332,653

234,211

211,039

325,940

230,520

208,078

214,431

212,924

column (B)

reported as deferred on

prior Form 990

benefits

30,003

25,82

34,485

45,620

45,218

28,417

28,423

28,423

17,648

19,207

Form 990, Schedule J,	Part II - Officers, Directors, Tru
(A) Name and Title	(B) Breakdown of W-2 and/or

(1)

(1)

(1)

(11)

(ı)

(11)

(1)

(1)

(11)

(1)

(ı)

(11)

(i) Base Compensation

267,015

234,379

234,379

152,090

133,727

117,143

120,573

110,233

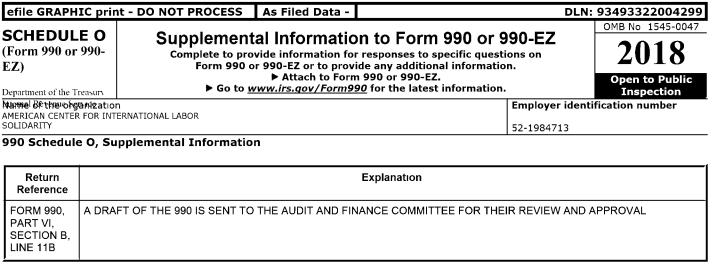
109,958

107,658

(ii)

Bonus & incentive

compensation



## 990 Schedule O, Supplemental Information

Return

Reference	
FORM 990,	THE CONFLICT OF INTEREST POLICY IS INCORPORATED INTO THE EMPLOYEE'S HANDBOOK AND COLLECTIV
PART VI,	E BARGAINING AGREEMENT (CBA) THE HANDBOOK IS DISTRIBUTED TO ALL STAFF AND RETAINED BY STA
SECTION B,	FF FOR THE REFERENCE ON SOLIDARITY CENTER'S OPERATING POLICY AND PROCEDURES DURING THE OR
LINE 12C	IENTATION FOR NEW EMPLOYEE, SOLIDARITY CENTER'S HR REVIEW THE CENTER'S POLICY AND PROCEDUR
	ES, INCLUDING CONFLICT OF INTEREST POLICY AND MADE THE NEW STAFF AWARE OF OUR POLICY

Explanation

## Return Explanation Reference

990 Schedule O, Supplemental Information

FORM 990,
PART VI,
SECTION B,
LINE 15

THE PROCESS OF DETERMINING COMPENSATION - SOLIDARITY CENTER'S BOARD OF DIRECTORS APPROVES
THE SALARY FOR THE EXECUTIVE DIRECTOR, AND THE EXECUTIVE DIRECTOR APPROVES THE SALARY FOR
EACH MANAGEMENT AND STAFF POSITION THE PAY SCALES WERE DIVIDED INTO CATEGORIES FOR EACH P
OSITION FOR MANAGEMENT AND STAFF EACH YEAR, THE PAY SCALES MAY BE ADJUSTED FOR COLA INCRE
ASES IN ACCORDANCE WITH ANY INCREASE MADE BY THE AFL-CIO

Return Explanation
Reference
FORM 990. THE DOCUMENTS ARE AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

LINE 19

FORM 990, THE DOCUMENTS ARE AVAILABLE UPON REQUEST PART VI, SECTION C,

Return Explanation
Reference

990 Schedule O, Supplemental Information

LINE 9

FORM 990, POSTRETIREMENT BENEFIT COSTS OTHER THAN NET PERIODIC BENEFIT COST -442,999
PART XI.

Explanation Return Reference

FORM 990. THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR PART XII,

LINE 2C

990 Schedule O, Supplemental Information

SCHEDULE R
(Form 990)

Related

Department of the Treasury

AMERICAN CENTER FOR INTERNATIONAL LABOR

Internal Revenue Service

Name of the organization

## **Related Organizations and Unrelated Partnerships**

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

► Attach to Form 990.

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

2018

Employer identification number

DLN: 93493322004299 OMB No 1545-0047

> Open to Public Inspection

SOLIDARITY 52-1984713 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (b) Direct controlling Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state Total income End-of-year assets Primary activity or foreign country) 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) (b) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? No Yes (1) LINE 7 BETTERMENT OF THE LIVES DC 501(C)(3) AMERICAN CENTER FOR EDUCATION FUND OF THE AMERICAN CENTER FOR INTERNATIONAL LABOR OF WORKING MEN AND INTERNATIONAL LABOR SOLIDARITY WOMEN WORLDWIDE SOLIDARITY 1130 CONNECTICUT AVENUE NW WASHINGTON, DC 20036 52-1984719 (2)AFL-CIO FEDERATION OF LABOR DC 501(C)(5) No 815 16TH STREET NW UNIONS N/A WASHINGTON, DC 20006 53-0228172 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2018

		(state or foreign country)	controlling entity	income(rela unrelated excluded fr tax unde sections 51 514)	d, rom r	ne end-of-year assets	alloca	rtionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	parti	ner?	Percent owners
							Yes	No		Yes	No	
ations Taxable as a C rganizations treated as	 Corporation a corporation	or Trus on or tru	<b>it</b> Complete st during th	l if the organe tax year	anızatıon an	 swered "Yes	on Fo	l orm 99	l 90, Part IV,	line	34	
<b>(b)</b> Primary activity	Lo dor (state)	.egal mıcıle or foreıgn			(e) Type of entity C corp, S corp, or trust)	<b>(f)</b> Share of total income		year	of- Perce	ntage	(13	(i) ction ! 3) con entit
												res
											_	$\downarrow$
											$\perp$	
				+							+	$\dashv$
	rganizations treated as	(b) Primary activity    Compared to the composition of the composition	rganizations treated as a corporation or tru	(b) Primary activity  (c) Legal domicile (state or foreign	(b) Primary activity  (c) Legal domicile (state or foreign  (d) Direct controlling entity  (d) Direct controlling entity	(b) Primary activity  (c) Legal domicile (state or foreign  (d) Direct controlling entity (C corp, S corp, or trust)	(b) (c) (d) (e) (f) Share of total domicile (state or foreign	(b) Primary activity  (c) Legal domicile (state or foreign  (d) Direct controlling entity (C corp, S corp, or trust)  (e) Type of entity (C corp, S corp, or trust)  (f) Share of total income	(b)   (c)   (d)   (e)   (f)   (g)   (Primary activity   Legal domicile (state or foreign   (state or for	(b)   (c)   (d)   Type of entity   C corp, S corp, or trust)   (state or foreign   (state or foreign   (c)   (dd)   (e)   (f)   (f	(b) (c) (d) (d) (e) (f) (g) (h) Primary activity (state or foreign (state or foreign)) (c) (d) (d) (e) (f) (f) (f) (g) (h) (h) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	(b) (c) (d) (e) (f) (g) (h) Primary activity Legal domicile (state or foreign (state or foreign) (c) (d) Type of entity (C corp, S corp, or trust) (C corp,

(2)AFL-CIO

No

No

No

No No

No

No

No

No

No

No

No

No

Yes

1f

1g

11

1m

1n Yes

10 Yes

1a |

1r

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

ACTUAL COST REIMBURSEMENT

ACTUAL AMOUNT CONTRIBUTED

ACTUAL COST REIMBURSEMENT

ACTUAL COST REIMBURSEMENT

Yes

Pai	<b>Transactions With Related Organizations</b> 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	Y	Yes	No
<b>1</b> Du	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	$\top$		
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	.a		No
b	Gift, grant, or capital contribution to related organization(s)	.b		No

1c 1d

Loans or loan quarantees to or for related organization(s) . . . 1e Loans or loan quarantees by related organization(s) . .

2 If the answer to any of the above is "Yes." see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(b)

Transaction type (a-s)

C

0

(c)

Amount involved

235,148

300,000

306,868

874.837

Sale of assets to related organization(s). Purchase of assets from related organization(s).

Name of related organization

(1) EDUCATION FUND OF THE AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY

(3) EDUCATION FUND OF THE AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY

(4) EDUCATION FUND OF THE AMERICAN CENTER FOR INTERNATIONAL LABOR SOLIDARITY

Lease of facilities, equipment, or other assets to related organization(s) . . . . . . . . . . . . . Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	Ar or	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		or ig ?	(k) Percentage ownership
İ			514)	Yes	No	ļ		Yes	No		Yes	No	
									_	Schedul	e R (Form	1 990	)) 2018

