

990

Form

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation): Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022

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

C Name of organization
AMERICAN POSTAL WORKERS UNION
AFL-CIO
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1300 L STREET NW 200
City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 200054128
F Name and address of principal officer:
ELIZABETH POWELL
1300 L STREET NW 200
WASHINGTON,DC 200054128

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

D Employer identification number
52-0913725
E Telephone number
(202) 842-4215
G Gross receipts \$ 61,957,076

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

J Website: WWW.APWU.ORG

K Form of organization: Corporation Trust Association Other

L Year of formation: 1971

M State of legal domicile: DC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
APWU IS RESPONSIBLE FOR THE NEGOTIATION AND IMPLEMENTATION OF A COLLECTIVE BARGAINING CONTRACT WITH THE USPS ON BEHALF OF THE MEMBERS OF THE UNION AND EMPLOYEES IN THE BARGAINING UNIT.

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

3 Number of voting members of the governing body (Part VI, line 1a) 13

4 Number of independent voting members of the governing body (Part VI, line 1b) 0

5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 427

6 Total number of volunteers (estimate if necessary) 0

7a Total unrelated business revenue from Part VIII, column (C), line 12 789,286

7b Net unrelated business taxable income from Form 990-T, Part I, line 11 413,198

Revenue

8 Contributions and grants (Part VIII, line 1h) 0

9 Program service revenue (Part VIII, line 2g) 55,998,033

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,421,729

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 463,546

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 57,883,308

Current Year

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 98,225

14 Benefits paid to or for members (Part IX, column (A), line 4) 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 23,442,198

16a Professional fundraising fees (Part IX, column (A), line 11e) 0

16b Total fundraising expenses (Part IX, column (D), line 25) 0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 17,414,641

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 40,955,064

19 Revenue less expenses. Subtract line 18 from line 12 16,928,244

Current Year

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 140,864,029

21 Total liabilities (Part X, line 26) 5,581,456

22 Net assets or fund balances. Subtract line 21 from line 20 135,282,573

End of Year

Part II Signature Block

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

Sign Here

Signature of officer
ELIZABETH POWELL SECRETARY-TREASURER
Type or print name and title

2023-10-08
Date

Paid Preparer Use Only

Print/Type preparer's name
Firm's name
Firm's address

Preparer's signature
CALIBRE CPA GROUP PLLC
7501 WISCONSIN AVENUE SUITE 1200
WEST BETHESDA, MD 20814

Date
Check if self-employed
PTIN P01325865
Firm's EIN 47-0900880
Phone no. (202) 331-9880

May the IRS discuss this return with the preparer shown above? See Instructions. Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2022)

Part III

Statement of Program Service Accomplishments

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

- 1 Briefly describe the organization's mission:
APWU IS RESPONSIBLE FOR THE NEGOTIATION AND IMPLEMENTATION OF A COLLECTIVE BARGAINING CONTRACT WITH THE USPS ON BEHALF OF THE MEMBERS OF THE UNION AND EMPLOYEES IN THE BARGAINING UNIT.
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.
- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)
IMPLEMENTATION OF NATIONAL COLLECTIVE BARGAINING AGREEMENT WITH US POSTAL SERVICE FOR 300,000 MEMBERS OF BARGAINING UNIT, INCLUDING NEGOTIATION & GRIEVANCE ARBITRARY PROCEDURES. ORGANIZING-UNION SOLICITS VOLUNTARY MEMBERSHIP FROM EMPLOYEES OF USPS & FROM PRIVATE CONTRACTORS PROVIDING SERVICES TO USPS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
EDUCATION-PUBLICATION OF MONTHLY TABLOID, BI-WEEKLY NEWSLETTERS & OTHER PRINTED MATTER; CONDUCTING TRAINING PROGRAMS IN STEWARDSHIP AND FEDERAL REPORTING, ETC.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
OPERATION OF APWU HEALTH PLAN (SEPARATE REPORTING ENTITY) UNDER FEHBA PROGRAM TO PROVIDE HEALTH/MEDICAL INSURANCE BENEFITS TO HP MEMBERS.

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

4e Total program service expenses

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	2	No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	Yes
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?	11f	Yes
12a If "Yes," complete Schedule D, Part XI. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes

Part IV

Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? 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	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 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	
26 Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?	26	No
27 If "Yes," complete Schedule L, Part I. Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	No
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	No
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?	30	No
31 If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?	33	Yes
34 If "Yes," complete Schedule R, Part I. 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
35a 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
36 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	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	204
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

Part V		Statements Regarding Other IRS Filings and Tax Compliance (continued)						
2a		Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		2a	427			
b		If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		Yes		
3a		Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Yes		
b		If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b		Yes		
4a		At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a			No	
b		If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5a		Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a			No	
b		Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b			No	
c		If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c				
6a		Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a			No	
b		If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b				
7		Organizations that may receive deductible contributions under section 170(c).						
a		Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a				
b		If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b				
c		Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c				
d		If "Yes," indicate the number of Forms 8282 filed during the year		7d				
e		Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e				
f		Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f				
g		If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g				
h		If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h				
8		Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8				
9		Sponsoring organizations maintaining donor advised funds.						
a		Did the sponsoring organization make any taxable distributions under section 4966?		9a				
b		Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b				
10		Section 501(c)(7) organizations. Enter:						
a		Initiation fees and capital contributions included on Part VIII, line 12		10a				
b		Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b				
11		Section 501(c)(12) organizations. Enter:						
a		Gross income from members or shareholders		11a				
b		Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		11b				
12a		Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a				
b		If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b				
13		Section 501(c)(29) qualified nonprofit health insurance issuers.						
a		Is the organization licensed to issue qualified health plans in more than one state?		13a				
		Note. See the instructions for additional information the organization must report on Schedule O.						
b		Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		13b				
c		Enter the amount of reserves on hand		13c				
14a		Did the organization receive any payments for indoor tanning services during the tax year?		14a			No	
b		If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b				
15		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?		15			No	
16		If the organization is a trust, did it file Form 4720, Schedule N, to report the section 4968 excise tax on net investment income?		16			No	
17		Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?		17				
		If "Yes," complete Form 6069.						

Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response or note to any line in this Part VI

☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

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

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

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	
18	Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ELIZABETH POWELL SECRETARY-TREASUR 1300 L STREET NW SUITE 200 WASHINGTON, DC 200054128 (202) 842-4215	

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization’s **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former			
(1) MARK DIMONDSTEIN PRESIDENT	40.00 1.00	X		X				184,679	0	30,320
(2) DEBORAH SZEREDY EXECUTIVE VICE-PRESIDENT	40.00 1.00	X		X				159,073	0	30,121
(3) ELIZABETH POWELL SECRETARY-TREASURER	40.00 1.00	X		X				167,745	0	26,732
(4) LAMONT BROOKS DIRECTOR CLERK DIVISION	40.00	X		X				156,277	0	24,626
(5) IDOWU BALOGUN DIRECTOR MAINTENANCE DIV	40.00	X		X				156,614	0	24,663
(6) MICHAEL FOSTER DIRECTOR MOTOR VEHICLE	40.00	X		X				155,958	0	24,627
(7) CHARLES CASH DIRECTOR INDUSTRIAL RELATIONS	40.00	X		X				120,216	0	29,342
(8) VANCE ZIMMERMAN FORMER DIRECTOR INDUSTRIAL RELATIONS	40.00	X		X				102,899	0	10,617
(9) TIFFANY FOSTER NORTHEAST RGNL COORDINATOR	40.00	X		X				129,434	0	27,671
(10) OMAR GONZALEZ WESTERN RGNL COORDINATOR	40.00	X		X				129,434	0	35,705
(11) ARTHUR JONES EASTERN RGNL COORDINATOR	40.00	X		X				129,523	0	35,705
(12) YARED WONDE SOUTHERN REGNL COORDINATOR	40.00	X		X				15,133	0	4,295
(13) KENNETH BEASLEY FORMER SOUTHERN REGNL COORDINATOR	40.00	X		X				110,619	0	18,805
(14) AMY PUHALSKI CENTRAL REGIONAL COORDINATOR	40.00	X		X				0	0	0
(15) SHARYN STONE FORMER CENTRAL RGNL COORDINATOR	40.00	X		X				122,500	0	20,825
(16) ARRION BROWN DIRECTOR SUPPORT SERVICES	40.00	X		X				20,346	0	5,028
(17) STEPHEN BROOKS FORMER DIRECTOR SUPPORT SERVICES	40.00	X		X				147,285	0	39,932

Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee			
(18) TERRY MARTINEZ ASST DIRECTO A MAINT DIV	40.00			X			147,514	0	23,269
(19) JASON TREIER ASST DIRECTOR B MAINT DIV	40.00			X			149,877	0	29,938
(20) SAM LISENBE ASST DIRECTOR A CLERK DIV	40.00			X			148,453	0	23,429
(21) BARBER PALLAS-BARBER ASST DIRECTOR B CLERK DIV	40.00			X			146,228	0	23,251
(22) KENNETH PRINZ ASST DIRECTOR MVS	40.00			X			154,171	0	24,584
(23) ANNA SMITH DIRECTOR ORGANIZATION DEPT	40.00			X			146,977	0	23,178
(24) JOYCE ROBINSON DIRECTOR RESEARCH & EDUC	40.00			X			141,583	0	23,214
(25) DALEO FREEMAN DIRECTOR HUMAN RELATIONS	40.00			X			109,520	0	28,709
(26) NANCY OLUMEKOR DIRECTOR RETIREE DEPT	40.00			X			125,080	0	20,825
(27) JUDY BEARD DIRECTOR LEGISLATIVE DEPT	40.00			X			156,190	0	24,627
(28) SARAH RODRIGUEZ DIRECTOR-HEALTH PLAN	40.00			X			0	0	314
(29) ORLANDO ANDERSON NBA SUPPORT SERVICES	40.00			X			17,573	0	4,299
(30) JUDITH MCCANN NBA SUPPORT SERVICES	40.00			X			112,684	0	19,156
(31) MARK KRUEGER NBA CENTRAL REG MVS	40.00			X			13,188	0	2,242
(32) DEVENDRA RATHORE NBA B WASH DC REG	40.00			X			118,040	0	33,873
(33) JAMES STEVENSON NBA C CHICAGO REG	40.00			X			128,700	0	18,957
(34) LINDA TURNEY NBA CENTRAL REG	40.00			X			118,040	0	32,590
(35) WILLIAM WRIGHT NBA CENTRAL REG MVS	40.00			X			111,459	0	18,934
(36) GREGORY BECKER NBA B MNPLS MN REG	40.00			X			13,188	0	2,904
(37) TODD ELKERTON NBA A MNPLS MINN REG	40.00			X			90,323	0	15,355
(38) MARTIN MATER NBA B MNPLS MN REG	40.00			X			103,524	0	17,585
(39) WILLIAM MELLEN NBA A MNPLS MINN REG	40.00			X			62,809	0	6,155
(40) CURTIS WALKER NBA C CENTRAL REG	40.00			X			111,594	0	18,957
(41) JEFFREY BEATON NBA B CENTRAL REG MAINT DIV	40.00			X			118,040	0	33,873
(42) ROBERT KESSLER NBA A ST LOUIS REG	40.00			X			118,547	0	19,030
(43) DANIEL SKEMP NBA B MEMPHIS	40.00			X			118,121	0	33,955
(44) CRAIG FISHER NBA CENTRAL REG MAINT	40.00			X			118,121	0	18,957
(45) MICHAEL FUNK NBA A WESTERN REGION	40.00			X			118,432	0	19,024
(46) MICHAEL SCHMID NBA C WORTH AREA	40.00			X			118,500	0	19,024
(47) JOHN JACKSON NBA PHILADELPHIA REGION	40.00			X			118,121	0	32,590
(48) GARRETT LANGLEY NBA EASTERN REG MVS	40.00			X			111,486	0	33,869
(49) KENNETH LESTER NBA EASTERN REG MAINT DIV	40.00			X			118,040	0	36,177
(50) ROBERT ROMANOWSKI NBA NE REG	40.00			X			118,040	0	33,906
(51) VINCE TARDUCCI NBA CENTRAL REG MAINT	40.00			X			121,541	0	19,553
(52) PAMELA RICHARDSON NBA A NEW ENGLAND REG	40.00			X			118,506	0	19,023
(53) RACHEL WALTHALL NBA A WASH DC REGION	40.00			X			118,040	0	33,873
(54) PETER CORADI NBA A NEW YORK REGION	40.00			X			118,591	0	19,037
(55) TIFFANY FOSTER NORTHEAST RGNL COORDINATOR	40.00			X			129,434	0	27,671
(56) JOSEPH LACAPRIA NBA NORTHEAST REG MVS	40.00			X			100,648	0	17,110
(57) ELIZABETH SWIGERT NBA B NORTHEAST REG	40.00			X			118,510	0	19,037
(58) BERNARD TIMMERMAN NBA A NORTHEAST AREA	40.00			X			118,121	0	25,320
(59) RICHARD WHITE NBA NORTHEAST REG MVS	40.00			X			13,188	0	2,242
(60) SCOTT HOFFMAN NBA B NEW ENGLAND REG	40.00			X			13,188	0	2,977
(61) STEPHEN LUKOSUS NBA B NEW ENGLAND REG	40.00			X			101,113	0	17,175
(62) THOMAS OBRIEN NBA C NEW ENGLAND REG	40.00			X			118,295	0	19,001
(63) DAVE SARNACKI NBA C CINN OH REG	40.00			X			118,040	0	33,873
(64) BILL MAZUROWSKI NBA A PHILADELPHIA REG	40.00			X			15,510	0	2,637
(65) FRANK RIGIERO NBA A PHILADELPHIA REG	40.00			X			154,756	0	19,559
(66) SAMUEL HERNANDEZ NBA CARIBBEAN AREA	40.00			X			14,764	0	2,510
(67) DANIEL SOTO NBA CARIBBEAN AREA	40.00			X			115,054	0	19,559
(68) JOE JOLLEY NBA A MEMPHIS REG CLRK DIV	40.00			X			111,513	0	25,839
(69) PAMELA SMITH NBA B MEMPHIS	40.00			X			118,040	0	18,957
(70) BRUCE AMEY NBA SO REG SW SUB-REG MVS	40.00			X			121,249	0	19,503
(71) JAMES DEMAURO NBA A ATLANTIC REG	40.00			X			118,040	0	35,263
(72) JOHN GEARHARD NBA A SOUTHERN REG MAINT	40.00			X			121,249	0	19,503
(73) SANDRA MUNOZ NBA B TAMPA FL	40.00			X			14,192	0	4,135
(74) DORIS ORR-RICHARDSON NBA B TAMPA FL	40.00			X			111,513	0	33,955
(75) MICHAEL SULLIVAN NBA B TAMPA FL	40.00			X			103,738	0	17,631
(76) CARLOS PAZ NBA FT WORTH AREA MAINT	40.00			X			118,121	0	33,873
(77) DIANN SCURLARK NBA SW SUB AND SO REG MVS	40.00			X			118,859	0	19,083
(78) DYRIKE SHAW NBA B ST LOUIS REG	40.00			X			118,040	0	33,873
(79) CHARLES TILLMAN NBA B DALLAS REGION	40.00			X			118,040	0	32,590
(80) ASHLEY CARGILL NBA B WITCHITA REG	40.00			X			118,121	0	35,263
(81) EMILY WEBER NBA WITCHITA KS	40.00			X			13,640	0	2,319
(82) JACK CRAWFORD NBA A DALLAS REGION	40.00			X			118,121	0	32,635
(83) MICHAEL HETTICHER NBA B SAN FRANCISCO AREA	40.00			X			13,519	0	2,298
(84) CHARLES LOCKE NBA D SAN FRANCISCO AREA	40.00			X			118,040	0	33,873
(85) JAMES PATARINI NBA ALASKA AREA PART TIME	40.00			X			38,011	0	6,462
(86) SHIRLEY TAYLOR NBA B SAN FRANCISCO AREA	40.00			X			100,696	0	17,118
(87) HECTOR BAEZ NBA WESTERN REGION MAINT	40.00			X			118,121	0	18,957
(88) STELLA JOANN GERHART NBA B DENVER CO AREA	40.00			X			102,855	0	17,485
(89) JOSEPH ZAMENICK NBA B DENVER CO AREA	40.00			X			13,188	0	3,680
(90) SONIA CANCHOLA-APODICA NBA B CENTRAL REG MAINT DIV	40.00			X			117,905	0	18,934
(91) FABIOLA DOMINGUEZ NBA C SAN FRANCISCO REG	40.00			X			13,589	0	2,310
(92) LOUIS KINGSLEY NBA A WESTERN REGION	40.00			X			118,121	0	33,873
(93) JEROME PITTMAN NBA WESTERN REG MVS	40.00			X			118,040	0	20,230
(94) ERIC VAN DYKE NBA C SAN FRANCISCO REG	40.00			X			101,823	0	17,310
(95) VICKI CARIOS NBA A DENVER REG	40.00			X			107,408	0	18,259
(96) LAMONT GREEN NBA A DENVER REG	40.00			X			13,357	0	2,271
(97) RUFINA PAGADUAN NBA PACIFIC AREA	40.00			X			111,513	0	18,957
(98) BRIAN DUNN NBA B WITCHITA REG	40.00			X			118,121	0	18,957
(99) BRIAN DUNSMORE NBA A WESTERN REGION	40.00			X			111,513	0	35,263
(100) TWEE NGUYEN ASST CONTROLLER	40.00				X		156,015	0	51,445
(101) ELIZABETH CONOLLY CONTROLLER	40.00				X		133,902	0	62,957
(102) HANNAH DECKER HR MNGR/EXEC ASST TO SEC-TREAS	40.00				X		128,929	0	77,148
(103) ROGER CRONK SR MANAGER INFO TECHNOLOGY	40.00				X		132,305	0	62,394
(104) PHILLIP TABBITA MNGR NEG SPVRT & SPCL PROJ	40.00				X		128,014	0	21,507
1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)					10,874,658		0		2,332,031
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 9 3									

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

Section B. Independent Contractors		
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
(A) Name and business address	(B) Description of services	(C) Compensation
AMERICAN ARBITRATION ASSOCIATION 230 SOUTH PHIA PHILADELPHIA, PA 19102	CONTRACT NEGOTIATIONS	3,036,743
CONVENTION SERVICES UNLIMITED 1701 CABIN BRANCH DR LANDOVER, MD 20785	CONVENTION SERVICES	1,969,678
KELLY PRESS INC 1701 CABIN BRANCH DR LANDOVER, MD 20785	PRINTING SERVICES	1,813,523
MURPHY ANDERSON PLLC 1401 K STREET NW STE 300 WASHINGTON, DC 20005	LEGAL SERVICES	1,623,932
GAYLORD NATIONAL HOTEL 201 WATERFRONT STREET NATIONAL HARBOR, MD 20745	CONVENTION	620,734
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 2 1		

Part VIII

Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and Other		1a	Federated campaigns . .	1a	
			Membership dues . .	1b	
			Fundraising events . .	1c	
			Related organizations	1d	
			Government grants (contributions)	1e	
			All other contributions, gifts, grants, and similar amounts not included above	1f	
			Noncash contributions included in lines 1a - 1f:\$	1g	
			h Total. Add lines 1a-1f ▶		

Program Service Revenue	2a	MEMBERSHIP DUES	Business Code				
			900099	48,434,445	47,645,159	789,286	
	b	HEALTH PLAN SERVICE	900099	9,294,622	9,294,622		
	c						
	d						
	e						
	f	All other program service revenue.					
g Total. Add lines 2a-2f.			57,729,067				

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)			2,241,742			2,241,742
4 Income from investment of tax-exempt bond proceeds						
5 Royalties			275,558			275,558
		(i) Real	(ii) Personal			
6a	Gross rents	568,920				
6b	Less: rental expenses	391,699				
6c	Rental income or (loss)	177,221				
d Net rental income or (loss)			177,221			177,221
		(i) Securities	(ii) Other			
7a	Gross amount from sales of assets other than inventory					
7b	Less: cost or other basis and sales expenses					
7c	Gain or (loss)					
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18			8a			
b Less: direct expenses			8b			
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities. See Part IV, line 19			9a			
b Less: direct expenses			9b			
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances			10a	165,968		
b Less: cost of goods sold			10b	162,002		
c Net income or (loss) from sales of inventory			3,966			3,966

OtherRevenueMiscAmt	11a	MISCELLANEOUS REVENUE	Business Code				
			900099	505,191	505,191		
	b	FIDELITY BOND REIMBURSEMENT	900099	449,830	449,830		
	c	LEGAL SETTLEMENT & AWARDS INCOME	900099	20,800	20,800		
	d	All other revenue					
	e Total. Add lines 11a-11d			975,821			
	12 Total revenue. See instructions			61,403,375	57,915,602	789,286	2,698,487

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	167,864			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	12,254,126			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	5,177,109			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	929,464			
9 Other employee benefits	4,322,746			
10 Payroll taxes	1,379,726			
11 Fees for services (non-employees):				
a Management				
b Legal	1,741,670			
c Accounting	152,750			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	98,418			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,605,414			
12 Advertising and promotion	1,189,915			
13 Office expenses	2,098,542			
14 Information technology	722,427			
15 Royalties				
16 Occupancy	2,283,318			
17 Travel	1,289,451			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,231,056			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,107,229			
23 Insurance	753,166			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a UBIT	16,855			
b AFFILIATIONS & ASST	3,150,574			
c OFFICER ELECTION	2,051,680			
d MAGAZINE & PUBLIC RELAT	1,648,064			
e All other expenses	3,317,966			
25 Total functional expenses. Add lines 1 through 24e	52,689,530			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

☐

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		17,344,711	1	12,775,552	
	2	Savings and temporary cash investments		672,674	2	50,422	
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		28,419	4	13,982	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges			9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	10,319,413			
	b	Less: accumulated depreciation	10b	4,981,319	5,015,758	10c	5,338,094
	11	Investments—publicly traded securities		117,708,514	11	121,291,386	
	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		93,953	15	78,196	
16	Total assets. Add lines 1 through 15 (must equal line 33)		140,864,029	16	139,547,632		
Liabilities	17	Accounts payable and accrued expenses		5,581,456	17	6,011,381	
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		0	25	14,097	
	26	Total liabilities. Add lines 17 through 25		5,581,456	26	6,025,478	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions		135,282,573	27	133,522,154	
	28	Net assets with donor restrictions			28		
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.						
	29	Capital stock or trust principal, or current funds			29		
	30	Paid-in or capital surplus, or land, building or equipment fund			30		
	31	Retained earnings, endowment, accumulated income, or other funds			31		
	32	Total net assets or fund balances		135,282,573	32	133,522,154	
	33	Total liabilities and net assets/fund balances		140,864,029	33	139,547,632	

Part XI

Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	61,403,375
2	Total expenses (must equal Part IX, column (A), line 25)	2	52,689,530
3	Revenue less expenses. Subtract line 2 from line 1	3	8,713,845
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	135,282,573
5	Net unrealized gains (losses) on investments	5	-10,474,264
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	133,522,154

Part XII

Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☒ Other <u>MODIFIED CASH</u> If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	No
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	Yes
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

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

Name of the organization AMERICAN POSTAL WORKERS UNION AFL-CIO	Employer identification number 52-0913725
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."	
2	Political campaign activity expenditures. See instructions	\$
3	Volunteer hours for political campaign activities. See instructions	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV.	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	\$
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	\$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1) APWU COMMITTEE OF POLITICAL ACTION	1300 L STREET NW WASHINGTON, DC 20006	52-1130171		757,910
2				
3				
4				
5				
6				

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check
- ☐
- if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B
- Check
- ☐
- if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e.</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000.</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000.</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000.</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000.</td></tr></tbody></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

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

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART I-A, LINE 1:	THE ORGANIZATION HELPS SUPPORT THE SECTION 527 BY PROMPTLY TRANSFERING THE CONTRIBUTIONS RECEIVED TO THE SEPARATE SEGREGATED FUND.

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Name of the organization AMERICAN POSTAL WORKERS UNION AFL-CIO	Employer identification number 52-0913725
--	--

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

1	Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____	
4	Number of states where property subject to conservation easement is located ▶ _____	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

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

☐

Part V Endowment Funds.

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

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

2

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

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

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

3a

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

(i) Unrelated organizations

(ii) Related organizations

b

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

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

4

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		782,171		782,171
b Buildings		3,296,806	1,280,500	2,016,306
c Leasehold improvements		1,804,577	804,361	1,000,216
d Equipment		4,355,801	2,816,400	1,539,401
e Other		80,058	80,058	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				5,338,094

Schedule D (Form 990) 2021

Part VII

Investments - Other Securities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII

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

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

Part IX

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

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

Part X

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	14,097

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

Part XI

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

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

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

Part XII

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

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

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

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART X, LINE 2:	ACCOUNTING STANDARDS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. APWU PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2022, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS.

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Schedule I
(Form 990)

Department of the
Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization
AMERICAN POSTAL WORKERS UNION
AFL-CIO

Employer identification number
52-0913725

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) AMERICANS FOR FINANCIAL REFORM 1615 L ST NW STE 450 WASHINGTON,DC 20036	82-2553525	501(C)(3)	20,000	0			CONTRIBUTION
(2) NCBCP 5 FL STE 500 WASHINGTON,DC 20036	52-1253112	501(C)(3)	10,000	0			CONTRIBUTION
(3) UNION COMMUNITY 815 BLACK LIVES MATTER PLAZA WASHINGTON,DC 20006		501(C)(3)	10,000	0			CONTRIBUTION
(4) ECONOMIC POLICY INSTITUTE 1225 EYE ST NW SUITE 600 WASHINGTON,DC 20005	52-1368964	501(C)(3)	10,000	0			CONTRIBUTION
(5) A PHILIP RANDOLPH INST 815 BLACK LIVES MATTER PLAZA WASHINGTON,DC 20006	13-2548181	501(C)(4)	7,000	0			CONTRIBUTION
(6) CBTU PO BOX 66268 WASHINGTON,DC 20035	52-1128179	501(C)(5)	7,000	0			CONTRIBUTION
(7) UMWA STRIKE AID FUND PO BOX 513 DUMFRIES,VA 22026	53-0159200	501(C)(5)	26,100	0			CONTRIBUTION
(8) KPWU DISASTER RELIEF FUND PO BOX 2018 BEREA,KY 40403		501(C)(5)	25,500	0			CONTRIBUTION

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 4
- 3 Enter total number of other organizations listed in the line 1 table 5

Part III

Grants and Other Assistance to Domestic Individuals.

Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV	Supplemental Information.
Return Reference	Explanation

Additional Data

Return to Form

Software ID:
Software Version:

Name of the organization
AMERICAN POSTAL WORKERS UNION
AFL-CIO

Employer identification number
52-0913725

Part I Questions Regarding Compensation

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

Part II

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

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

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1MARK DIMONDSTEIN PRESIDENT	(i)	184,679	0	0	30,320	0	214,999	0
	(ii)	0	0	0	0	- 0	- 0	0
2TWEЕ NGUYEN ASST CONTROLLER	(i)	119,781	0	36,234	20,363	31,082	207,460	0
	(ii)	0	0	0	0	- 0	- 0	0
3HANNAH DECKER HR MNGR/EXEC ASST TO SEC-TREAS	(i)	119,273	0	9,656	20,276	56,872	206,077	0
	(ii)	0	0	0	0	- 0	- 0	0
4ELIZABETH CONOLLY CONTROLLER	(i)	126,083	0	7,819	21,434	41,523	196,859	0
	(ii)	0	0	0	0	- 0	- 0	0
5ROGER CRONK SR MANAGER INFO TECHNOLOGY	(i)	122,768	0	9,537	20,871	41,523	194,699	0
	(ii)	0	0	0	0	- 0	- 0	0
6ELIZABETH POWELL SECRETARY-TREASURER	(i)	167,745	0	0	26,732	0	194,477	0
	(ii)	0	0	0	0	- 0	- 0	0
7DEBORAH SZEREDY EXECUTIVE VICE-PRESIDENT	(i)	159,073	0	0	26,696	3,425	189,194	0
	(ii)	0	0	0	0	- 0	- 0	0
8STEPHEN BROOKS FORMER DIRECTOR SUPPORT SERVICES	(i)	147,285	0	0	25,038	14,894	187,217	0
	(ii)	0	0	0	0	- 0	- 0	0
9IDOWU BALOGUN DIRECTOR MAINTENANCE DIV	(i)	145,075	0	11,539	24,663	0	181,277	0
	(ii)	0	0	0	0	- 0	- 0	0
10LAMONT BROOKS DIRECTOR CLERK DIVISION	(i)	144,858	0	11,419	24,626	0	180,903	0
	(ii)	0	0	0	0	- 0	- 0	0
11JUDY BEARD DIRECTOR LEGISLATIVE DEPT	(i)	144,862	0	11,328	24,627	0	180,817	0
	(ii)	0	0	0	0	- 0	- 0	0
12MICHAEL FOSTER DIRECTOR MOTOR VEHICLE	(i)	144,862	0	11,096	24,627	0	180,585	0
	(ii)	0	0	0	0	- 0	- 0	0
13JASON TREIER ASST DIRECTOR B MAINT DIV	(i)	139,342	0	10,535	23,688	6,250	179,815	0
	(ii)	0	0	0	0	- 0	- 0	0
14KENNETH PRINZ ASST DIRECTOR MVS	(i)	144,611	0	9,560	24,584	0	178,755	0
	(ii)	0	0	0	0	- 0	- 0	0
15FRANK RIGIERO NBA A PHILADELPHIA REG	(i)	115,054	0	39,702	19,559	0	174,315	0
	(ii)	0	0	0	0	- 0	- 0	0
16SAM LISENBE ASST DIRECTOR A CLERK DIV	(i)	137,818	0	10,635	23,429	0	171,882	0
	(ii)	0	0	0	0	- 0	- 0	0
17TERRY MARTINEZ ASST DIRECTO A MAINT DIV	(i)	136,879	0	10,635	23,269	0	170,783	0
	(ii)	0	0	0	0	- 0	- 0	0
18ANNA SMITH DIRECTOR ORGANIZATION DEPT	(i)	136,342	0	10,635	23,178	0	170,155	0
	(ii)	0	0	0	0	- 0	- 0	0
19BARBER PALLAS-BARBER ASST DIRECTOR B CLERK DIV	(i)	136,768	0	9,460	23,251	0	169,479	0
	(ii)	0	0	0	0	- 0	- 0	0
20ARTHUR JONES EASTERN RGNL COORDINATOR	(i)	122,288	0	7,235	20,789	14,916	165,228	0
	(ii)	0	0	0	0	- 0	- 0	0

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21OMAR GONZALEZ WESTERN RGNL COORDINATOR	(i)	122,288	0	7,146	20,789	14,916	165,139	0
	(ii)	0	0	0	0	- 0	- 0	0
22JOYCE ROBINSON DIRECTOR RESEARCH & EDUC	(i)	136,555	0	5,028	23,214	0	164,797	0
	(ii)	0	0	0	0	- 0	- 0	0
23TIFFANY FOSTER NORTHEAST RGNL COORDINATOR	(i)	122,288	0	7,146	20,789	6,882	157,105	0
	(ii)	0	0	0	0	- 0	- 0	0
24TIFFANY FOSTER NORTHEAST RGNL COORDINATOR	(i)	122,288	0	7,146	20,789	6,882	157,105	0
	(ii)	0	0	0	0	- 0	- 0	0
25KENNETH LESTER NBA EASTERN REG MAINT DIV	(i)	111,514	0	6,526	18,957	17,220	154,217	0
	(ii)	0	0	0	0	- 0	- 0	0
26ASHLEY CARGILL NBA B WITCHITA REG	(i)	111,514	0	6,607	18,957	16,306	153,384	0
	(ii)	0	0	0	0	- 0	- 0	0
27JAMES DEMAURO NBA A ATLANTIC REG	(i)	111,514	0	6,526	18,957	16,306	153,303	0
	(ii)	0	0	0	0	- 0	- 0	0
28DANIEL SKEMP NBA B MEMPHIS	(i)	111,514	0	6,607	18,957	14,998	152,076	0
	(ii)	0	0	0	0	- 0	- 0	0
29CARLOS PAZ NBA FT WORTH AREA MAINT	(i)	111,514	0	6,607	18,957	14,916	151,994	0
	(ii)	0	0	0	0	- 0	- 0	0
30LOUIS KINGSLEY NBA A WESTERN REGION	(i)	111,514	0	6,607	18,957	14,916	151,994	0
	(ii)	0	0	0	0	- 0	- 0	0
31ROBERT ROMANOWSKI NBA NE REG	(i)	111,514	0	6,526	18,957	14,949	151,946	0
	(ii)	0	0	0	0	- 0	- 0	0
32DEVENDRA RATHORE NBA B WASH DC REG	(i)	111,514	0	6,526	18,957	14,916	151,913	0
	(ii)	0	0	0	0	- 0	- 0	0
33JEFFREY BEATON NBA B CENTRAL REG MAINT DIV	(i)	111,514	0	6,526	18,957	14,916	151,913	0
	(ii)	0	0	0	0	- 0	- 0	0
34RACHEL WALTHALL NBA A WASH DC REGION	(i)	111,514	0	6,526	18,957	14,916	151,913	0
	(ii)	0	0	0	0	- 0	- 0	0
35DAVE SARNACKI NBA C CINN OH REG	(i)	111,514	0	6,526	18,957	14,916	151,913	0
	(ii)	0	0	0	0	- 0	- 0	0
36DYRIKE SHAW NBA B ST LOUIS REG	(i)	111,514	0	6,526	18,957	14,916	151,913	0
	(ii)	0	0	0	0	- 0	- 0	0
37CHARLES LOCKE NBA D SAN FRANCISCO AREA	(i)	111,514	0	6,526	18,957	14,916	151,913	0
	(ii)	0	0	0	0	- 0	- 0	0
38JACK CRAWFORD NBA A DALLAS REGION	(i)	111,514	0	6,607	18,957	13,678	150,756	0
	(ii)	0	0	0	0	- 0	- 0	0
39JOHN JACKSON NBA PHILADELPHIA REGION	(i)	111,514	0	6,607	18,957	13,633	150,711	0
	(ii)	0	0	0	0	- 0	- 0	0
40LINDA TURNEY NBA CENTRAL REG	(i)	111,514	0	6,526	18,957	13,633	150,630	0
	(ii)	0	0	0	0	- 0	- 0	0
41CHARLES TILLMAN NBA B DALLAS REGION	(i)	111,514	0	6,526	18,957	13,633	150,630	0
	(ii)	0	0	0	0	- 0	- 0	0

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
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Additional Data

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Software ID:
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Name of the organization

AMERICAN POSTAL WORKERS UNION

AFL-CIO

Employer identification number

52-0913725

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE CATEGORIES OF MEMBERSHIP WITH VOTING ELIGIBILITY ARE: ACTIVE POSTAL, PRIVATE SECTOR, FULL DUES CASH PAY AND \$24 RETIREE.
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS IN GOOD STANDING OTHER THAN HONORARY STATUS MEMBERS ARE ENTITLED THE RIGHT TO VOTE.
FORM 990, PART VI, SECTION A, LINE 7B	THE DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY THE DELEGATES AND REPRESENTATIVES OF THE MEMBERS THROUGH MAJORITY VOTE DURING THE NATIONAL CONVENTIONS.
FORM 990, PART VI, SECTION B, LINE 11B	UPON RECEIPT OF FORM 990 FROM THE INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT, THE PRESIDENT, EXECUTIVE VICE PRESIDENT AND THE SECRETARY-TREASURER REVIEW THE RETURN BEFORE FILING THE FORM 990 FOR PROCESSING.
FORM 990, PART VI, SECTION C, LINE 18	FORM 990 IS AVAILABLE UPON REQUEST AND ALSO FOUND IN THE NON-FOR-PROFIT SEARCH AT FOUNDATION CENTER AND GUIDESTAR.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS ARE PUBLICLY AVAILABLE ON THE DEPARTMENT OF LABOR WEBSITE. THE ORGANIZATION PROVIDES THE FINANCIAL STATEMENTS TO MEMBERS UPON REQUEST. THE ORGANIZATION DOES NOT HAVE A CONFLICT OF INTEREST POLICY.
FORM 990, PART IX, LINE 24B: AFFILIATIONS & ASSISTANCE EXPENSES	THE APWU PARTICIPATES WITH SOME OF ITS AFFILIATED LOCAL UNION ON A NUMBER OF PROGRAMS RELATED TO THE EXEMPT FUNCTION. THESE PROGRAMS INCLUDE ORGANIZING PROGRAMS TO INCREASE MEMBERSHIP, UTILIZATION OF LOCAL UNION STAFF ON VARIOUS ASSIGNMENTS AND OTHER COORDINATED EFFORTS. THESE AMOUNTS ARE REFLECTED AS AFFILIATED AND ASSISTANCE EXPENSE.
FORM 990, PART XII, LINE 2A:	THE FINANCIAL STATEMENTS ARE PRESENTED USING THE MODIFIED CASH BASIS OF ACCOUNTING. THIS HAS NOT CHANGED FROM THE PRIOR YEAR.
FORM 990, PART XII, LINE 2C:	THE PROCESS HAS NOT BEEN CHANGED FROM PRIOR YEAR.

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Name of the organization
AMERICAN POSTAL WORKERS UNION
AFL-CIO

Employer identification number

52-0913725

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) APWU FLORIDA LLC 1300 L ST NW WASHINGTON, DC 20005	HOLD TITLE TO PROPERTY	DC			AMERICAN POSTAL WORKERS UNION AFL-CIO
(2) APWU NEW YORK LLC 1300 L ST NW WASHINGTON, DC 20005	HOLD TITLE TO PROPERTY	DC			AMERICAN POSTAL WORKERS UNION AFL-CIO
(3) APWU NEW JERSEY LLC 1300 L ST NW WASHINGTON, DC 20005	HOLD TITLE TO PROPERTY	DC			AMERICAN POSTAL WORKERS UNION AFL-CIO
(4) APWU TRAVEL AND PLANNING LLC 1300 L ST NW WASHINGTON, DC 20005	TRAVEL SERVICES	DC			AMERICAN POSTAL WORKERS UNION AFL-CIO

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) HALLBECK SCHOLARSHIP FUND 1300 L STREET NW WASHINGTON, DC 20005 23-7058046	SCHOLARSHIP BENEFITS FOR THE CHILDREN OF POSTAL CLERKS	DC	501(C)(3)	LINE 12C, III-FI			No
(2) APWU HOLDING CORPORATION 1300 L STREET NW WASHINGTON, DC 20005 52-1975237	OWNS THE APWU HEADQUARTERS BUILDING	DC	501(C)(2)				No
(3) APWU COMMITTEE ON POLITICAL ACTION 1300 L STREET NW WASHINGTON, DC 20005 52-1130171	SEPARATE SEGREGATED FUND	DC	527				No
(4) APWU HEALTH PLAN 799 CROMWELL PARK DRIVE GLEN BURNIE, MD 21061 52-0940594	HEALTH PLAN TO ALL MEMBERS, RETIREES AND ELIGIBLE DEPENDENTS	DC	501(C)(9)				No
(5) APWU OFFICERS QUALIFIED RETIREMENT PLAN 1300 L STREET NW WASHINGTON, DC 20005 52-6130923	DEFINED BENEFIT PLAN	DC	401(B)				No
(6) APWU EMPLOYEES' RETIREMENT PLAN 1300 L STREET NW WASHINGTON, DC 20005 52-6100773	DEFINED BENEFIT PLAN	DC	401(B)				No
(7) APWU EMPLOYEES' RETIREMENT 401K PLAN 1300 L STREET NW WASHINGTON, DC 20005 52-0913725	DEFINED CONTRIBUTION PLAN	DC	401(K)				No
(8) APWU CWA GUILD 401K PLAN 1300 L STREET NW WASHINGTON, DC 20005 52-0913725	DEFINED CONTRIBUTION PLAN	DC	401(K)				No
(9) APWU SEPARATE SEGREGATED ACCOUNT 1300 L STREET NW WASHINGTON, DC 20005 35-2456340	SEPARATE SEGREGATED FUND	DC	527				No

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

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

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

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

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

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

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

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

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

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

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

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

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

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

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

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation
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Schedule R (Form 990) 2021

Additional Data

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