Labor Organization Officer and Employee Report

U.S. Department of Labor
Office of Labor-Management Standards

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439,440.

OMB No. 1214-0001 12/31/86

LM 000 106

1. Name and address of person filing	2. Name and address of labor organization
Linda Chavez-Thompson 815 16th Street, N.W. Washington D.C. 20005	American Federation of Labor & Congress of Industrialized Organizations AFL-CIO Building 815 16th Street, N.W. Washington D.C. 20005

3. Position in labor organization	4. Date fiscal year ended	5. File number (if assigned)
Executive Vice President	December 31, 2001	41927

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value **from an employer whose employees your organization represents** or is actively seeking to represent.

6. Name of Employer — Address of Employer

7. Nature of Interest, Transaction or Income

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name of business — Address of business

ULLICO Inc. and The Union Labor Life Insurance Company, 111 Massachusetts Ave., NW, Washington DC 20001

9. Business deals with—	10. If 9B or 9C is checked give trust or employer's name
☐ A. Labor Organization ☐ B. Trust ☐ C. Employer	

11. Nature and approximate dollar value of such dealings

The AFL-CIO has group insurance policies with Union Labor Life for which $3,372,386.02 in premiums was paid for coverage of all eligible employees of the AFL-CIO. Affiliated locals and Funds, in which they have an interest, also have insurance policies with Union Labor Life. The AFL-CIO has pension plan contracts with Union Labor Life to which deposits may be made.

12. Nature of interest held or income received

Director's Fees and Fees for attending Directors Meetings - $3,000.00

C. **Received from any employer** (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13. Name and address of employer ☐ or consultant ☐	14. Nature of payment

IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS

15. **Signature and verification**—The undersigned declares, under the applicable penalties of the law, that all of the information in this report, including the attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct and complete.

Signed: Linda Chavez Thompson at Washington (City), DC (State) on April 2, 2002 (Date)

Form LM-30 (Rev. 1986)