

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2020

Open to Public Inspection

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.

Form 990 Department of the Treasury Internal Revenue Service

A For the 2020 calendar year, or tax year beginning 09-01-2020, and ending 08-31-2021

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

C Name of organization: WASHINGTON EDUCATION ASSOCIATION. Doing business as: PO BOX 9100. Address: FEDERAL WAY, WA 980639100

D Employer identification number: 91-0460645. E Telephone number: (253) 765-7007. G Gross receipts \$ 48,704,573

F Name and address of principal officer: LARRY DELANEY

H(a) Is this a group return for subordinates? No. H(b) Are all subordinates included? No. H(c) Group exemption number

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

J Website: WWW.WASHINGTONEA.ORG

K Form of organization: Corporation

L Year of formation: 1889. M State of legal domicile: WA

Part I Summary

Table with 4 main sections: 1. Briefly describe the organization's mission (TO PROMOTE THE TEACHING PROFESSION AND PUBLIC EDUCATION IN THE STATE OF WASHINGTON). 2. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3-7a: Activities & Governance (Voting members, employees, volunteers, revenue). 7b: Net unrelated business taxable income. 8-12: Revenue (Contributions, program service, investment, other). 13-19: Expenses (Grants, benefits, salaries, fundraising, other). 20-22: Net Assets or Fund Balances (Total assets, liabilities, net assets).

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: DONNA WESLEY CFO. Date: 2022-06-30. Type or print name and title.

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date 2022-06-30, Check if self-employed, PTIN P00171649, Firm's name TREMPER & CO LLP, Firm's EIN 91-0872222, Firm's address 3131 ELLIOTT AVE STE 290 SEATTLE, WA 98121, Phone no. (206) 285-4456.

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MISSION OF THE WASHINGTON EDUCATION ASSOCIATION IS TO ADVANCE THE PROFESSIONAL INTERESTS OF ITS MEMBERS IN ORDER TO MAKE PUBLIC EDUCATION THE BEST IT CAN BE FOR STUDENTS, STAFF, AND COMMUNITIES.

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 \$ )

GOVERNANCE/ADMINISTRATION - TO FORMULATE ASSOCIATION POLICY AND TO ENSURE IMPLEMENTATION OF THE GOALS, OBJECTIVES AND ACTIVITIES OF THE ASSOCIATION IN ACCORDANCE WITH THE DESIRES AND NEEDS OF THE MEMBERSHIP. TO PROVIDE GOVERNANCE WITH ADVICE AND COUNSEL AS PRESCRIBED IN WEA POLICY ON THE FORMULATION OF GOALS, OBJECTIVES, POLICY AND ACTIVITIES OF THE ASSOCIATION IN THE FOLLOWING GENERAL AREAS: ACCREDITATION, CERTIFICATION, INSTRUCTION, PERSONNEL, COLLECTIVE BARGAINING, STATE AND FEDERAL LEGISLATION, HUMAN RELATIONS, AND RIGHTS OF SCHOOL EMPLOYEES. TO PROVIDE LEGAL SERVICES AND ADVICE TO WEA, ITS STAFF AND GOVERNANCE, LOCAL ASSOCIATIONS, AND MEMBERS; TO PROTECT AND STRENGTHEN THE LEGAL AND BARGAINING RIGHTS OF SCHOOL EMPLOYEES. PUBLIC POLICY CENTER - TO ENSURE THAT WEA IS A SIGNIFICANT PARTICIPANT IN THE LEGISLATIVE PROCESS OF THE STATE AND NATION, OBTAIN PASSAGE AND IMPLEMENTATION OF LEGISLATION CONSISTENT WITH ASSOCIATION GOALS AND ASSURE ADEQUATE RESOURCE ALLOCATIONS TO IMPROVE SALARIES, CONDITIONS OF WORK, AND EDUCATIONAL PROGRAMS. CENTER FOR EDUCATION QUALITY: ORGANIZING AND ADVOCACY CENTER - TO PROVIDE PROGRAM AND STAFF SERVICES TO ASSIST INDIVIDUAL SCHOOL EMPLOYEES AND LEADERS TO OBTAIN AND UTILIZE THE INDIVIDUAL AND COLLECTIVE POWER THEY NEED TO CONTROL THEIR WORK ENVIRONMENT, INCLUDING APPROPRIATE COMPENSATION. TO PROVIDE RESEARCH SUPPORT ENABLING THE ASSOCIATION TO CARRY OUT ITS GOALS AND OBJECTIVES IN AN EFFICIENT MANNER. COMMUNICATION AND PR CENTER - TO INFORM THE MEMBERSHIP AND THE PUBLIC THROUGH UTILIZATION OF INTERNAL AND EXTERNAL MEDIA OF THE ASSOCIATION'S GOALS AND ACHIEVEMENTS AND OF THE PROFESSION'S CONCERN FOR PUBLIC EDUCATION IN WASHINGTON.

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

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

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

4e Total program service expenses

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding tax-exempt bond issues, excess benefit transactions, and related party transactions.

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 [ ]

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and gaming winnings.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Main form area containing questions 2a through 16, with sub-questions and corresponding answer boxes (e.g., 2a, 2b, 3a, 3b, etc.).

If "Yes," complete Form 4720, Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 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?...

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 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?...

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 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:

DONNA WESLEY PO BOX 9100 FEDERAL WAY, WA 980639100 (253) 765-7007

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ARMAND L TIBERIO SEPT 20 - DEC 20 EXECUTIVE DI	37.50			X				241,927	0	51,192
(2) AIMEE IVERSON JAN 21 - AUG 21 EXECUTIVE DI	37.50			X				194,169	0	121,359
(3) DONNA WESLEY CFO	37.50			X				247,804	0	115,841
(4) ERIC ASKELAND BOARD MEMBER	5.00	X						0	0	0
(5) SILAS BERRY BOARD MEMBER	5.00	X						0	0	0
(6) BILL BEVILLE BOARD MEMBER	5.00	X						0	0	0
(7) JOSH BOE BOARD MEMBER	5.00	X						0	0	0
(8) KAITLIN KAMALEI BRANDON BOARD MEMBER	5.00	X						0	0	0
(9) SHAWN BREHM BOARD MEMBER	5.00	X						0	0	0
(10) JANET CALDWELL BOARD MEMBER	5.00	X						0	0	0
(11) TAMMIE CARR BOARD MEMBER	5.00	X						0	0	0
(12) DEBBY CHANDLER BOARD MEMBER	5.00	X						0	0	0
(13) JO BENTO BOARD MEMBER	5.00	X						0	0	0
(14) MICHAEL LAWGRANCE COOK BOARD MEMBER	5.00	X						0	0	0
(15) KEVIN COPE BOARD MEMBER	5.00	X						0	0	0
(16) KEVEN CUMMINS BOARD MEMBER	5.00	X						0	0	0
(17) JULIANNA DAUBLE BOARD MEMBER	5.00	X						0	0	0

**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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
(18) SWAN EATON BOARD MEMBER	5.00	X					0	0	
(19) MICHELLE FAYETTE BOARD MEMBER	5.00	X					0	0	
(20) VALLERIE FISHER BOARD MEMBER	5.00	X					0	0	
(21) FILMA FONTANILLA BOARD MEMBER	5.00	X					0	0	
(22) COOKIE GRANT-SUGGS BOARD MEMBER	5.00	X					0	0	
(23) TAMMY GRUBB BOARD MEMBER	5.00	X					0	0	
(24) BRITTANY HAGGARD BOARD MEMBER	5.00	X					0	0	
(25) DANIEL HARADA BOARD MEMBER	5.00	X					0	0	
(26) LEN HILL BOARD MEMBER	5.00	X					0	0	
(27) ELAINE HOGG BOARD MEMBER	5.00	X					0	0	
(28) GLENN JENKINS BOARD MEMBER	5.00	X					0	0	
(29) PAMELLA JOHNSON BOARD MEMBER	5.00	X					0	0	
(30) SARA KETELSEN BOARD MEMBER	5.00	X					0	0	
(31) JARED KINK BOARD MEMBER	5.00	X					0	0	
(32) PETER KNOWLES BOARD MEMBER	5.00	X					0	0	
(33) NANI LIUM BOARD MEMBER	5.00	X					0	0	
(34) MARGARITA MORFIN BOARD MEMBER	5.00	X					0	0	
(35) RAY NELSON BOARD MEMBER	5.00	X					0	0	
(36) KIRSTIN NICHOLSON BOARD MEMBER	5.00	X					0	0	
(37) ANDI NOFZIGER BOARD MEMBER	5.00	X					0	0	
(38) MARTHA PATTERSON BOARD MEMBER	5.00	X					0	0	
(39) MICHAEL PENA BOARD MEMBER	5.00	X					0	0	
(40) RITA PETERSON BOARD MEMBER	5.00	X					0	0	
(41) JEREMY PITTS BOARD MEMBER	5.00	X					0	0	
(42) BECCA RITCHIE BOARD MEMBER	5.00	X					0	0	
(43) MONA ROMINGER BOARD MEMBER	5.00	X					0	0	
(44) AUDRA SHAW BOARD MEMBER	5.00	X					0	0	
(45) SUSAN SMITH BOARD MEMBER	5.00	X					0	0	
(46) ALLISON SNOW BOARD MEMBER	5.00	X					0	0	
(47) SUZANNE SOUTHERLAND BOARD MEMBER	5.00	X					0	0	
(48) AMY STERN BOARD MEMBER	5.00	X					0	0	
(49) KAYALYN STEWART BOARD MEMBER	5.00	X					0	0	
(50) JOE THAYER BOARD MEMBER	5.00	X					0	0	
(51) RACHEL TOCHIKI BOARD MEMBER	5.00	X					0	0	
(52) CAITLIN TUMLINSON BOARD MEMBER	5.00	X					0	0	
(53) NICOLE WAY BOARD MEMBER	5.00	X					0	0	
(54) PAMELA WILSON BOARD MEMBER	5.00	X					0	0	
(55) KATHIE AXTELL BOARD MEMBER	5.00	X					0	0	
(56) JEN BEN BOARD MEMBER	5.00	X					0	0	
(57) BARB CRUZ BOARD MEMBER	5.00	X					0	0	
(58) SHANNON ERGUN BOARD MEMBER	5.00	X					0	0	
(59) JUSTIN FOX-BAILEY BOARD MEMBER	5.00	X					0	0	
(60) BOB GUSTIN BOARD MEMBER	5.00	X					0	0	
(61) ROCHELLE GREENWELL BOARD MEMBER	5.00	X					1,525	0	
(62) VICKY JENSEN BOARD MEMBER	5.00	X					0	0	
(63) PRICE JIMERSON BOARD MEMBER	5.00	X					10,400	0	
(64) TANI LINDQUIST BOARD MEMBER	5.00	X					0	0	
(65) MARY LINDSEY BOARD MEMBER	5.00	X					0	0	
(66) BILL LYNE BOARD MEMBER	5.00	X					0	0	
(67) ANNA-MELISSA LYONS BOARD MEMBER	5.00	X					0	0	
(68) JENNIFER MATTER BOARD MEMBER	5.00	X					0	0	
(69) HOWARD MAWHINNEY BOARD MEMBER	5.00	X					0	0	
(70) LAVASHA MURDOCH BOARD MEMBER	5.00	X					0	0	
(71) CARLA NACCARATO-SINCLAIR BOARD MEMBER	5.00	X					0	0	
(72) JAN OLMSTEAD BOARD MEMBER	5.00	X					0	0	
(73) CHRISTIE PADILLA BOARD MEMBER	5.00	X					0	0	
(74) ERIC PICKENS BOARD MEMBER	5.00	X					0	0	
(75) SHANNON RASMUSSEN BOARD MEMBER	5.00	X					0	0	
(76) JIM SCHELL BOARD MEMBER	5.00	X					0	0	
(77) JEREMY SHAY BOARD MEMBER	5.00	X					0	0	
(78) SUMMER STONER BOARD MEMBER	5.00	X					0	0	
(79) CAMERON MUNRO BOARD MEMBER	5.00	X					0	0	
(80) KEITH SWANSON BOARD MEMBER	5.00	X					0	0	
(81) KARI VAN NOSTRAN BOARD MEMBER	5.00	X					0	0	
(82) TERRI WINCKLER BOARD MEMBER	5.00	X					0	0	
(83) JEB BINNS BOARD MEMBER	5.00	X					0	0	
(84) STEPHANIE ERVIN BOARD MEMBER	5.00	X					1,175	0	
(85) SHANNON MCCANN BOARD MEMBER	5.00	X					0	0	
(86) MARTHA PATTERSON BOARD MEMBER	5.00	X					0	0	
(87) SOBIA SHEIKH BOARD MEMBER	5.00	X					0	0	
(88) ROB LUTZ BOARD PARLIA	5.00	X					0	0	
(89) ANTOINETTE FELDER EX OFFICIO B	5.00	X					0	0	
(90) LARRY DELANEY PRESIDENT	37.50	X		X			178,196	98,672	15,965
(91) JANIE WHITE VICE PRESIDE	37.50	X		X			163,906	68,703	15,060
(92) NACHE' DUNCAN ADV. AND ORG	37.50			X			191,667	0	113,988
(93) RICH WOOD ADV. AND ORG	37.50			X			180,984	0	113,986
(94) MANUEL BOSSER DIRECTOR/HUM	37.50			X			194,334	0	115,776
(95) LISA KODAMA DIR. LEARNIN	37.50			X			175,091	0	115,043
(96) MARY HOWES DIR. ADV. AN	37.50			X			199,845	0	123,689
(97) LINDA MULLEN DIR. COMMUNI	37.50			X			171,302	0	107,356
(98) SCOTT POIRIER PROFESSIONAL	37.50				X		181,944	0	112,487
(99) MICHAEL GAWLEY PROFESSIONAL	37.50				X		172,624	0	94,258
(100) ERIC HANSEN PROFESSIONAL	37.50				X		176,630	0	95,363
(101) JENNIFER SILVES PROFESSIONAL	37.50				X		171,092	0	95,260
(102) SHELBY HOPKINS PROFESSIONAL	37.50				X		171,895	0	94,281
<b>1b Sub-Total</b>									
<b>c Total from continuation sheets to Part VII, Section A</b>									
<b>d Total (add lines 1b and 1c)</b>							3,026,510	167,375	1,500,904

**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 **127**

	Yes	No
<b>3</b> Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		No
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations more than \$150,000? If "Yes," complete Schedule J for such individual	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		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
SCION STAFFING INC 415 SW 2ND AVE PORTLAND, OR 97204	STAFFING	187,207
HARRIET STRASBERG ATTORNEY AT LAW 203 4TH AVENUE EAST STE 250 OLYMPIA, WA 98501	LEGAL SERVICES	131,079
JOSEPH EVANS, PO BOX 519 BREMERTON, WA 98337	LEGAL SERVICES	128,222
THE RANTS GROUP 724 COLUMBIA ST NW OLYMPIA, WA 98501	RENT	108,625

**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 **4**

Part VIII Statement of Revenue

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

Main revenue statement table with columns (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, and (D) Revenue excluded from tax under sections 512 - 514. Rows include Contributions, Grants, and Other Similar Amounts; Program Service Revenue; and Other Revenue.

**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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	543,367			
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	2,768,235			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	8,158,703			
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,751,448			
<b>9</b> Other employee benefits	3,151,551			
<b>10</b> Payroll taxes	1,021,178			
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	1,122,605			
<b>c</b> Accounting	117,969			
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,030,668			
<b>12</b> Advertising and promotion	131,239			
<b>13</b> Office expenses	2,595,772			
<b>14</b> Information technology	474,916			
<b>15</b> Royalties				
<b>16</b> Occupancy	604,816			
<b>17</b> Travel	77,857			
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	288,707			
<b>20</b> Interest	179,866			
<b>21</b> Payments to affiliates	12,603,820			
<b>22</b> Depreciation, depletion, and amortization	327,665			
<b>23</b> Insurance				
<b>24</b> 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.)				
<b>a</b> COVID MEMBER SUPPORT	507,632			
<b>b</b> DUES AND FEES	173,297			
<b>c</b> SETTLEMENT REFUNDS	80,308			
<b>d</b> CREDIT CARD AND BANK PROC	74,257			
<b>e</b> All other expenses				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	43,785,876	0	0	0
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash-non-interest-bearing . . . . .	9,388,186	<b>1</b>	14,590,343
	<b>2</b> Savings and temporary cash investments	12,965,660	<b>2</b>	13,379,163
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	7,335,299	<b>4</b>	6,747,069
	<b>5</b> 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		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 14,803,510		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 6,457,520	8,591,906	<b>10c</b> 8,345,990
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11	19,828,472	<b>15</b>	16,404,219
<b>16 Total assets:</b> Add lines 1 through 15 (must equal line 33) . . . . .	58,109,523	<b>16</b>	59,466,784	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	1,729,146	<b>17</b>	877,529
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	411,946	<b>19</b>	409,416
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> 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		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	4,133,494	<b>23</b>	3,857,781
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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	89,146,197	<b>25</b>	70,032,236
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	95,420,783	<b>26</b>	75,176,962
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	-37,311,260	<b>27</b>	-15,710,178
	<b>28</b> Net assets with donor restrictions		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
	<b>32</b> Total net assets or fund balances	-37,311,260	<b>32</b>	-15,710,178
<b>33</b> Total liabilities and net assets/fund balances	58,109,523	<b>33</b>	59,466,784	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	48,703,845
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	43,785,876
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	4,917,969
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	-37,311,260
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	16,683,113
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	<b>10</b>	-15,710,178

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant? 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b>	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**Form 990, Special Condition Description:**

**Special Condition Description**

2020

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

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 WASHINGTON EDUCATION ASSOCIATION

Employer identification number

91-0460645

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) \$ 847,773
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.

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received. Rows 1-6.

**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.

<b>Limits on Lobbying Expenditures</b> <b>(The term "expenditures" means amounts paid or incurred.)</b>	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%; text-align: left;">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.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> 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? .....	<input type="checkbox"/> Yes <input type="checkbox"/> 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.)**

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> 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
<b>1</b> 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:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> 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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b> Yes	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b> Yes	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year? .....	<b>3</b>	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."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	<b>3</b>	
<b>4</b> 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? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**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
SCHEDULE C, PART I-A, LINE 1	MEMBER COMMUNICATIONS, TRAINING AND INDIRECT SUPPORT CONCERNING EFFORTS TO ELECT STATE AND LOCAL CANDIDATES.

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

# Supplemental Financial Statements

# 2020

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
WASHINGTON EDUCATION ASSOCIATION

**Employer identification number**  
91-0460645

## **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.

	Held at the End of the 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:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance . . . . .             | <b>1c</b> |
| <b>d</b> Additions during the year . . . . .     | <b>1d</b> |
| <b>e</b> Distributions during the year . . . . . | <b>1e</b> |
| <b>f</b> Ending balance . . . . .                | <b>1f</b> |
- 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
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> 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 . . . . .

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

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

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

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" 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
<b>1a</b> Land . . . . .		2,573,437		2,573,437
<b>b</b> Buildings . . . . .		9,131,222	3,595,797	5,535,425
<b>c</b> Leasehold improvements				
<b>d</b> Equipment . . . . .		1,802,806	1,624,586	178,220
<b>e</b> Other . . . . .		1,296,045	1,237,137	58,908
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				8,345,990

**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 _____		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (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
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (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) UNFUNDED PENSION RECEIVABLE - AFFILI	16,039,937
(2) SUPPLIES AND DEFERRED EXPENSES	364,282
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 15.)	16,404,219

**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	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	70,032,236

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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	52,601,418
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	3,897,573	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	3,897,573
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	48,703,845
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .		<b>5</b>	48,703,845

**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.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	47,683,449
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	3,897,573	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	3,897,573
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	43,785,876
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .		<b>5</b>	43,785,876

**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
SCHEDULE D, PAGE 4, PART XI, LINE 2D	EMPLOYEE RETENTION CREDIT - REVENUE ON FINANCIAL STATEMENT 3,897,573
SCHEDULE D, PAGE 4, PART XII, LINE 2D	EMPLOYEE RETENTION CREDIT - REDUCTION OF EXPENSE ON 990 3,897,573

## **Additional Data**

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**Software Version:**

**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](http://www.irs.gov/Form990) for the latest information.

Name of the organization  
WASHINGTON EDUCATION ASSOCIATION

Employer identification number  
91-0460645

**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) BEST START FOR KIDS PO BOX 21961 SEATTLE, WA 98111	86-3425631	(C)(4)	35,000				PROVIDE SUPPORT TO O
(2) BLUE MOUNTAIN ACTION COUNCIL FOOD B 8 E CHERRY ST WALLA WALLA, WA 98362	91-0793597	(C)(3)	20,000				PROVIDE SUPPORT TO O
(3) CARING FOR KIDS 237 ELDORADO AVE FIRCREST, WA 98466	27-3768291	(C)(3)	20,000				PROVIDE SUPPORT TO O
(4) CHILDREN OF THE VALLEY 1318 S 18TH ST MT VERNON, WA 98274	26-2867395	(C)(3)	10,000				PROVIDE SUPPORT TO O
(5) EL CENTRO DE LA RAZA 2524 16TH AVE S SEATTLE, WA 98144	91-0899927	(C)(3)	20,000				PROVIDE SUPPORT TO O
(6) NORTHWEST ACCOUNTABILITY PROJECT PO BOX 42561 PORTLAND, OR 97242	32-0478413	(C)(4)	20,000				PROVIDE SUPPORT TO O
(7) FAMILIAS UNIDAS POR LA JUSTICIA 275 W RIO VISTA AVE 3 BURLINGTON, WA 98233	84-3519206	(C)(3)	10,000				PROVIDE SUPPORT TO O
(8) FAMILY PROMISE OF SKAGIT COUNTY PO BOX 335 SEDRO WOOLLEY, WA 98284	46-2556043	(C)(3)	10,000				PROVIDE SUPPORT TO O
(9) INTERNATIONAL RESCUE COMMITTEE INC 1200 S 192ND ST STE 101 SEATAC, WA 98148	13-5660870	(C)(3)	10,000				PROVIDE SUPPORT TO O
(10) LAKE BURIEN PRESBYTERIAN CHURCH 15003 14TH AVE SW BURIEN, WA 98166	91-0616446	(C)(3)	50,000				PROVIDE SUPPORT TO O
(11) SEATTLE FOUNDATION PO BOX 35146 SEATTLE, WA 98124	91-6013536	(C)(3)	25,000				PROVIDE SUPPORT TO O
(12) SKAGIT VALLEY NEIGHBORS IN NEED FOO 1615 S 2ND ST MOUNT VERNON, WA 98273	91-0951646	(C)(3)	10,000				PROVIDE SUPPORT TO O
(13) SNOHOMISH COUNTY MUTUAL AID 3020 RUCKER 203 EVERETT, WA 98201	91-1392816	(C)(3)	10,000				PROVIDE SUPPORT TO O
(14) SUNRISE OUTREACH CENTER 211 E MARTIN LURTHER KING JR BLVD YAKIMA, WA 98901	27-1028426	(C)(3)	10,000				PROVIDE SUPPORT TO O
(15) WASHINGTON STATE LABOR COUNCIL AFL 321 16TH AVE S SEATTLE, WA 98144	91-0668471	(C)(5)	130,000				PROVIDE SUPPORT TO O

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 34
- 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.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
SCHEDULE I, PAGE 1, PART I, LINE 2	GRANTS OR ASSISTANCE IS ONLY PROVIDED TO ORGANIZATIONS LOCATED WITHIN THE UNITED STATES SHARING COMMON INTERESTS.

**Additional Data**

**Return to Form**

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

**Schedule J**  
**(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
- ▶ **Attach to Form 990.**
- ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
WASHINGTON EDUCATION ASSOCIATION

Employer identification number

91-0460645

**Part I Questions Regarding Compensation**

**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.

- |   |  |
|---|--|
| <input type="checkbox"/> First-class or charter travel            | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                    | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account           | <input type="checkbox"/> 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

**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?

**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.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> 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.

**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.

**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.

**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.

**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.

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		No
4b		No
4c		No
5a		
5b		
6a		
6b		
7		
8		
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ARMAND L TIBERIO SEPT 20 - DEC 20 EXECUTIVE DIRECTOR	(i)	241,927			20,460	30,732	293,119	
	(ii)					-	-	
2 AIMEE IVERSON JAN 21 - AUG 21 EXECUTIVE DIRECTOR	(i)	194,169			79,896	41,463	315,528	
	(ii)					-	-	
3 DONNA WESLEY CFO	(i)	247,804			88,244	27,597	363,645	
	(ii)					-	-	
4 LARRY DELANEY PRESIDENT	(i)	178,196			11,490	4,475	194,161	
	(ii)	98,672				-	-	98,672
5 JANIE WHITE VICE PRESIDENT	(i)	163,906			11,423	3,637	178,966	
	(ii)	68,703				-	-	68,703
6 NACHE' DUNCAN ADV. AND ORG. MANAGE	(i)	191,667			72,927	41,061	305,655	
	(ii)					-	-	
7 RICH WOOD ADV. AND ORG. MANAGE	(i)	180,984			72,925	41,061	294,970	
	(ii)					-	-	
8 MANUEL BOSSER DIRECTOR/HUMAN RESOU	(i)	194,334			79,145	36,631	310,110	
	(ii)					-	-	
9 LISA KODAMA DIR. LEARNING AND ED	(i)	175,091			73,978	41,065	290,134	
	(ii)					-	-	
10 MARY HOWES DIR. ADV. AND ORG.	(i)	199,845			82,258	41,431	323,534	
	(ii)					-	-	
11 LINDA MULLEN DIR. COMMUNICATIONS	(i)	171,302			70,951	36,405	278,658	
	(ii)					-	-	
12 SCOTT POIRIER PROFESSIONAL STAFF	(i)	181,944			71,703	40,784	294,431	
	(ii)					-	-	
13 MICHAEL GAWLEY PROFESSIONAL STAFF	(i)	172,624			64,647	29,611	266,882	
	(ii)					-	-	
14 ERIC HANSEN PROFESSIONAL STAFF	(i)	176,630			64,647	30,716	271,993	
	(ii)					-	-	
15 JENNIFER SILVES PROFESSIONAL STAFF	(i)	171,092			64,603	30,657	266,352	
	(ii)					-	-	
16 SHELBY HOPKINS PROFESSIONAL STAFF	(i)	171,895			64,670	29,611	266,176	
	(ii)					-	-	

**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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**SCHEDULE O**  
**(Form 990 or 990-**  
**EZ)****Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**2020****Open to Public  
Inspection**

Department of the Treasury

Name of the organization

WASHINGTON EDUCATION ASSOCIATION

Employer identification number

91-0460645

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	GOVERNANCE/ADMINISTRATION - TO FORMULATE ASSOCIATION POLICY AND TO ENSURE IMPLEMENTATION OF THE GOALS, OBJECTIVES AND ACTIVITIES OF THE ASSOCIATION IN ACCORDANCE WITH THE DESIRES AND NEEDS OF THE MEMBERSHIP. TO PROVIDE GOVERNANCE WITH ADVICE AND COUNSEL AS PRESCRIBED IN WEA POLICY ON THE FORMULATION OF GOALS, OBJECTIVES, POLICY AND ACTIVITIES OF THE ASSOCIATION IN THE FOLLOWING GENERAL AREAS: ACCREDITATION, CERTIFICATION, INSTRUCTION, PERSONNEL, COLLECTIVE BARGAINING, STATE AND FEDERAL LEGISLATION, HUMAN RELATIONS, AND RIGHTS OF SCHOOL EMPLOYEES. TO PROVIDE LEGAL SERVICES AND ADVICE TO WEA, ITS STAFF AND GOVERNANCE, LOCAL ASSOCIATIONS, AND MEMBERS; TO PROTECT AND STRENGTHEN THE LEGAL AND BARGAINING RIGHTS OF SCHOOL EMPLOYEES. PUBLIC POLICY CENTER - TO ENSURE THAT WEA IS A SIGNIFICANT PARTICIPANT IN THE LEGISLATIVE PROCESS OF THE STATE AND NATION, OBTAIN PASSAGE AND IMPLEMENTATION OF LEGISLATION CONSISTENT WITH ASSOCIATION GOALS AND ASSURE ADEQUATE RESOURCE ALLOCATIONS TO IMPROVE SALARIES, CONDITIONS OF WORK, AND EDUCATIONAL PROGRAMS. CENTER FOR EDUCATION QUALITY: ORGANIZING AND ADVOCACY CENTER - TO PROVIDE PROGRAM AND STAFF SERVICES TO ASSIST INDIVIDUAL SCHOOL EMPLOYEES AND LEADERS TO OBTAIN AND UTILIZE THE INDIVIDUAL AND COLLECTIVE POWER THEY NEED TO CONTROL THEIR WORK ENVIRONMENT, INCLUDING APPROPRIATE COMPENSATION. TO PROVIDE RESEARCH SUPPORT ENABLING THE ASSOCIATION TO CARRY OUT ITS GOALS AND OBJECTIVES IN AN EFFICIENT MANNER. COMMUNICATION AND PR CENTER - TO INFORM THE MEMBERSHIP AND THE PUBLIC THROUGH UTILIZATION OF INTERNAL AND EXTERNAL MEDIA OF THE ASSOCIATION'S GOALS AND ACHIEVEMENTS AND OF THE PROFESSION'S CONCERN FOR PUBLIC EDUCATION IN WASHINGTON.
FORM 990, PAGE 6, PART VI, LINE 6	THE ORGANIZATION HAS DUES PAYING MEMBERS THAT ARE PUBLIC SCHOOL EMPLOYEES IN THE STATE OF WASHINGTON. THESE MEMBERS HAVE THE RIGHT TO VOTE FOR MEMBERS OF THE BOARD OF DIRECTORS.
FORM 990, PAGE 6, PART VI, LINE 7A	MEMBERSHIP ANNUALLY ELECTS THE BOARD OF DIRECTORS.
FORM 990, PAGE 6, PART VI, LINE 11B	THE FORM 990 IS REVIEWED BY MEMBERS OF THE BUDGET AND FINANCE COMMITTEE OF THE BOARD OF DIRECTORS PRIOR TO FILING.
FORM 990, PAGE 6, PART VI, LINE 12C	ANY IDENTIFIED CONFLICTS ARE ADDRESSED AS PROVIDED FOR IN THE BOARD APPROVED CONFLICT OF INTEREST DOCUMENT.
FORM 990, PAGE 6, PART VI, LINE 15A	THE COMPENSATION DETERMINATION PROCESS INCLUDES APPROVAL BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, COMPARISONS TO OTHER ORGANIZATIONS, AND IS DOCUMENTED IN BOARD MINUTES. OFFICER/KEY EMPLOYEE COMPENSATION IS DETERMINED AS EMPLOYMENT CONTRACTS ARE ESTABLISHED AND RENEWED. PRESIDENT AND VICE PRESIDENT/TREASURER COMPENSATION IS SET BY BOARD POLICY. ONGOING COMPENSATION IS PERIODICALLY REVIEWED BY THE EXECUTIVE COMMITTEE OR DURING CONTRACT RENEWALS.
FORM 990, PAGE 6, PART VI, LINE 15B	THE COMPENSATION DETERMINATION PROCESS INCLUDES APPROVAL BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, COMPARISONS TO OTHER ORGANIZATIONS, AND IS DOCUMENTED IN BOARD MINUTES. OFFICER/KEY EMPLOYEE COMPENSATION IS DETERMINED AS EMPLOYMENT CONTRACTS ARE ESTABLISHED AND RENEWED. PRESIDENT AND VICE PRESIDENT/TREASURER COMPENSATION IS SET BY BOARD POLICY. ONGOING COMPENSATION IS PERIODICALLY REVIEWED BY THE EXECUTIVE COMMITTEE OR DURING CONTRACT RENEWALS.
FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST AT THE ORGANIZATION'S HEADQUARTERS AND ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE.
FORM 990, PART XI, LINE 9	CHANGE IN UNFUNDED PENSION LIABILITY 16,683,113

## **Additional Data**

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