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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

Doing Business As

Number and street (or P O box if mail is not delivered to street address) 3060 WILLAMETTE DRIVE NE No 200 | Room/suite

City or town, state or country, and ZIP + 4
LACEY, WA 98516

D Employer identification number
91-0961051

E Telephone number
(360) 486-2380

G Gross receipts $ 20,764,936

F Name and address of principal officer
DONALD G PIERCE
3060 WILLAMETTE DRIVE NE No 200
LACEY, WA 98516

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW WASPC ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1963

M State of legal domicile WA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO LEAD COLLABORATION AMONG LAW ENFORCEMENT EXECUTIVES TO ENHANCE PUBLIC SAFETY

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	14
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
5	Total number of employees (Part V, line 2a)	5	35
6	Total number of volunteers (estimate if necessary)	6	17
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	5,266,607	18,510,514
9	Program service revenue (Part VIII, line 2g)	9,931,106	211,920
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,996	8,906
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	918,089	879,317
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16,129,798	19,610,657
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,120,955	12,619,224
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)	2,593,703	2,651,128
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	8,078,610	4,059,599
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	15,793,268	19,329,951
19	Revenue less expenses Subtract line 18 from line 12	336,530	280,706

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	8,459,877	8,253,073
21	Total liabilities (Part X, line 26)	5,695,466	5,207,956
22	Net assets or fund balances Subtract line 21 from line 20	2,764,411	3,045,117

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

****** | 2010-10-15
Signature of officer | Date

DONALD G PIERCE EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: Jane M Searing | Date | Check if self-empolyed ☐ | Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4: CLARK NUBER PS
10900 NE 4TH STREET SUITE 1700
BELLEVUE, WA 98004

EIN ▶

Phone no ▶ (425) 454-4919

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

TO PROVIDE A MEANS FOR LAW ENFORCEMENT EXECUTIVES IN WASHINGTON STATE TO IDENTIFY AND COOPERATE IN THE SOLUTION OF COMMON PROBLEMS RELATING TO THE MANAGEMENT OF LAW ENFORCEMENT AGENCIES AND THE DELIVERY OF LAW ENFORCEMENT AND CORRECTIONAL SERVICES

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 exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 $ 5,187,784 including grants of $ 4,937,365) (Revenue $)

WA AUTO THEFT PREVENTION AUTHORITY - PROVIDE GRANT FUNDS TO LOCAL LAW ENFORCEMENT AGENCIES TO COMBAT AUTO THEFT

4b (Code) (Expenses $ 4,803,105 including grants of $ 4,796,000) (Revenue $)

SEX OFFENDER ADDRESS VERIFICATION - PROVIDE GRANTS TO LOCAL SHERIFFS' OFFICES TO VERIFY THE ADDRESSES OF ALL REGISTERED SEX OFFENDERS

4c (Code) (Expenses $ 1,160,952 including grants of $) (Revenue $)

CORRECTIONAL OPTIONS SERVICES - PROVIDE HOME DETENTION & OTHER SENTENCING ALTERNATIVES TO INCARCERATED PERSONS CONVICTED OF CRIMES BY LOCAL & STATE COURTS

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 7,018,928 including grants of $ 2,885,859) (Revenue $ 1,084,883)

4e **Total program service expenses** ▶ $ 18,170,769

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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, 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 term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11	Yes	
	● Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	● 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.*			
	● 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.*			
	● 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.*			
	● Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	● 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? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? **Yes** / **No** *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — **12A** No			
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, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III*	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*	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
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States 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, questions 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 questions 24b–24d and complete Schedule K. If "No," go to line 25*	**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) and 501(c)(4) 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**		No
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**		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *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 Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *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? *If "Yes," complete Schedule M*	**30**		No
31	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**	Yes	
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? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35**		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**		No
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 in Schedule O for Part VI, lines 11 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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0-* if not applicable	1a	14		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	35		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b		Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	3a			No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			No
b	If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
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, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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?	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			No
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			No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	7f			No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .	7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the 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			

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.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . .	1a 14		
b	Enter the number of voting members that are independent . .	1b 14		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . .	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

KIM GOODMAN
3060 WILLAMETTE DR NE SUITE 200
LACEY, WA 98516
(360) 486-2385

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

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 Use Schedule J-2 if additional space is needed

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

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

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
See add'l data										

1b Total . . . . . ▶	501,913	0	66,544

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 4

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
APPRISS INC 10401 LINN STATION ROAD LOUISVILLE, KY 402233842	LAW ENFORCEMENT SOFTWARE SOLUTIONS	1,542,435
PREPARED RESPONSE INC 600 UNIVERSITY STREET SUITE 1525 SEATTLE, WA 98101	CRITICAL INCIDENT MANAGEMENT	717,050
ORCHID CELLMARK 5698 SPRINGBORO PIKE DAYTON, OH 45449	DNA TESTING SERVICES	123,708

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 3

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b	93,625			
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	18,416,889			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f $ 2,025					
	h	**Total.** Add lines 1a-1f		18,510,514			
Program Service Revenue			Business Code				
	2a	WASPC CONF/SEMINAR	900,099	211,295	211,295		
	b	DRUG TEST KITS	900,099	625	625		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f		211,920			
	3	Investment income (including dividends, interest and other similar amounts)		8,906			8,906
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
			(i) Real	(ii) Personal			
	6a	Gross Rents	40,440				
	b	Less rental expenses	1,413				
	c	Rental income or (loss)	39,027				
	d	Net rental income or (loss)		39,027	39,027		
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
Other Revenue	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances	a	1,986,802			
	b	Less cost of goods sold	b	1,152,866			
	c	Net income or (loss) from sales of inventory		833,936	833,936		
		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS INCOME	900,099	6,354			6,354
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d		6,354			
	12	**Total revenue.** See Instructions		19,610,657	1,084,883	0	15,260

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) but are not required to complete columns (B), (C), and (D).

	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 governments and organizations in the U S See Part IV, line 21	12,619,224	12,619,224		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	153,168	116,183	36,985	
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	1,952,274	1,649,880	302,394	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	115,976	102,506	13,470	
9	Other employee benefits	251,764	215,576	36,188	
10	Payroll taxes	177,946	140,868	37,078	
11	Fees for services (non-employees)				
a	Management				
b	Legal	18,027		18,027	
c	Accounting	48,643		48,643	
d	Lobbying	36,495		36,495	
e	Professional fundraising *See Part IV, line 17*				
f	Investment management fees				
g	Other	2,693,247	2,693,247		
12	Advertising and promotion	35,052	35,052		
13	Office expenses	146,684	89,711	56,973	
14	Information technology				
15	Royalties				
16	Occupancy	356,484	46,343	310,141	
17	Travel	94,660	74,864	19,796	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	212,499	202,900	9,599	
20	Interest	588	588		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	234,620	30,501	204,119	
23	Insurance	545	49	496	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	EQUIPMENT-SECTOR/ETRIP	133,765	133,765		
b	VEHICLE REPAIR & MAINT	24,032	17,227	6,805	
c	MISCELLANEOUS	19,149	812	18,337	
d	DUES	5,109	1,473	3,636	
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	19,329,951	18,170,769	1,159,182	0
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		215,028	1	337,484
	2	Savings and temporary cash investments		375,559	2	518,237
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		3,737,592	4	3,493,785
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		12,916	8	13,307
	9	Prepaid expenses and deferred charges		49,281	9	47,091
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 5,028,947			
	b	Less accumulated depreciation	10b 1,411,862	3,842,218	10c	3,617,085
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets		28,690	14	27,491
	15	Other assets See Part IV, line 11		198,593	15	198,593
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		8,459,877	16	8,253,073
Liabilities	17	Accounts payable and accrued expenses		3,032,214	17	2,845,097
	18	Grants payable		298,044	18	56,475
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties		2,365,208	23	2,306,384
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		5,695,466	26	5,207,956
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		2,764,411	27	3,045,117
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		2,764,411	33	3,045,117
	34	Total liabilities and net assets/fund balances		8,459,877	34	8,253,073

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	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?	3a	Yes	
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	Yes	

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

Employer identification number
91-0961051

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

_____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☑ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support?
Total									

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) **12**

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	7,859,381	8,075,280	8,238,518	14,968,883	18,510,514	57,652,576
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,453,122	1,692,983	1,745,760	1,975,728	252,360	7,119,953
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	9,312,503	9,768,263	9,984,278	16,944,611	18,762,874	64,772,529
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b						0
8 **Public Support** (Subtract line 7c from line 6)						64,772,529

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	9,312,503	9,768,263	9,984,278	16,944,611	18,762,874	64,772,529
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,332	5,680	8,180	8,755	8,906	34,853
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	3,332	5,680	8,180	8,755	8,906	34,853
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	13,325	16,102	3,925	15,167	6,354	54,873
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)	9,329,160	9,790,045	9,996,383	16,968,533	18,778,134	64,862,255

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	99 860 %
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	90 890 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	17	0 050 %
18	Investment income percentage from **2008** Schedule A, Part III, line 17	18	0 350 %

19a **33 1/3% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:

Software Version:

EIN: 91-0961051

Name: WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

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

4d. Other program services

(Code) (Expenses $ 958,383 including grants of $) (Revenue $)

JAIL BOOKING & REPORTING SYSTEM - COLLECT STATEWIDE JAIL STATISTIC DEVELOPMENT, IMPLEMENTATION, TRAINING, AND TRANSITION TO INFORMATION SYSTEMS

(Code) (Expenses $ 843,020 including grants of $) (Revenue $)

WORK CLOSELY WITH WASHINGTON STATE CRIMINAL JUSTICE TRAINING COMMISSION TO PROVIDE EXECUTIVE LEVEL TRAINING TO MEMBERS PROVIDE SUPPORT TO MEMBERSHIP THROUGH WORKING COMMITTEES, REPRESENTATION ON STAKEHOLDER COMMITTEES AND PROVIDING EXECUTIVE LEVEL LAW ENFORCEMENT POINT OF VIEW

(Code) (Expenses $ 764,977 including grants of $) (Revenue $)

CRITICAL INCIDENT MAPPING - PROVIDE ELECTRONIC MAPPING OF SCHOOLS AND COMMUNITY COLLEGES AS WELL AS PUBLIC BUILDINGS PROVIDES FIRST RESPONDERS WITH ACCURATE DATA IN THE EVENT OF A DISASTER

(Code) (Expenses $ 830,377 including grants of $ 817,758) (Revenue $)

RURAL DRUG TASK FORCES - PROVIDE LAW ENFORCEMENT WITH FUNDING TO OPERATE MULTI-JURISDICTIONAL TASK FORCES WITH EMPHASIS ON DRUG CRIME REDUCTION

(Code) (Expenses $ 766,936 including grants of $ 739,724) (Revenue $)

METHAMPHETAMINE INITIATIVE - PROVIDE LAW ENFORCEMENT AGENCIES WITH FUNDING TO COMBAT METHAMPHETAMINE RELATED CRIME VIA EQUIPMENT, PERSONNEL, TASK FORCES, ETC

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

4d. Other program services

(Code) (Expenses $ 536,868 including grants of $ 530,410) (Revenue $)

GANG/GRAFFITI ABATEMENT - PROVIDE GRANT FUNDS TO LOCAL LAW ENFORCEMENT AGENCIES TO COMBAT GRAFFITI AND GANG RELATED ACTIVITIES

(Code) (Expenses $ 305,827 including grants of $) (Revenue $)

FALSE ALARM - PROVIDE INFORMATION AND TRAINING ON FALSE ALARM REDUCTION

(Code) (Expenses $ 155,091 including grants of $ 138,205) (Revenue $)

ANTI-GANG PROGRAM - PROVIDE FUNDING FOR TASK FORCES, MEDIA OUTREACH AND TRAINING IN SUPPORT OF THE PRESIDENT'S ANTI-GANG INITIATIVE

(Code) (Expenses $ 159,032 including grants of $) (Revenue $)

SECTOR/PCH & CACHE - PROVIDE LOCAL LAW ENFORCEMENT AGENCIES WITH PRINTERS AND SCANNERS FOR TRAFFIC ENFORCEMENT VEHICLES TO ASSIST IN THE STATEWIDE IMPLEMENTATION OF THE SECTOR (ELECTRONIC TICKETING) PROGRAM

(Code) (Expenses $ 367,674 including grants of $ 334,055) (Revenue $)

TRAFFIC GRANTS - PROVIDE LAW ENFORCEMENT WITH EQUIPMENT AND EDUCATIONAL GRANTS

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

4d. Other program services

(Code) (Expenses $ 257,591 including grants of $) (Revenue $)

SEX OFFENDER WEBSITE - PROVIDE COMMUNITIES WITH REGISTERED SEX OFFENDER INFORMATION, E G , TYPE OF CONVICTION, LOCATION OF REGISTERED RESIDENCE, VICINITY TO SCHOOLS, ETC ALSO LINKED WITH NATIONAL SEX OFFENDER REGISTRY

(Code) (Expenses $ 224,966 including grants of $) (Revenue $)

UNIFORM CRIME REPORTING/INCIDENT BASED REPORTING - COLLECT STATE-WIDE CRIME STATISTICS FOR ANNUAL "CRIME IN WASHINGTON STATE" REPORT DEVELOPMENT, IMPLEMENTATION AND TRANSITION TO INCIDENT BASED REPORTING

(Code) (Expenses $ 181,221 including grants of $) (Revenue $)

STRANGER RAPE DNA - PROVIDE ASSISTANCE TO LOCAL LAW ENFORCEMENT RELATED TO DNA TESTING OF RAPE CASES WITH UNKNOWN OFFENDERS

(Code) (Expenses $ 367,085 including grants of $ 325,707) (Revenue $)

PROJECT SAFE NEIGHBORHOODS - PROVIDE FUNDING FOR PROSECUTORS, TASK FORCES, MEDIA OUTREACH AND TRAINING IN SUPPORT OF THE PRESIDENT'S GUN VIOLENCE INITIATIVE

(Code) (Expenses $ 98,884 including grants of $) (Revenue $ 1,045,231)

CONFERENCE/MEMORABILIA - PROVIDES MEMBERSHIP WITH SEMIANNUAL CONFERENCES INCLUDES STATE CERTIFIED TRAINING AS WELL AS COMMITTEE MEETINGS AND CHIEF/SHERIFF/JAIL MANAGER MEETINGS

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

4d. Other program services

(Code) (Expenses $ 43,843 including grants of $) (Revenue $)

LEGISLATIVE SERVICES - PROVIDES MEMBERSHIP WITH LEGISLATIVE REPRESENTATION IN STATE LEGISLATURE WORKS CLOSELY WITH LEGISLATIVE COMMITTEES TO REPRESENT MEMBERSHIP INTERESTS

(Code) (Expenses $ 32,219 including grants of $) (Revenue $)

SEX OFFENDER RECORD RETENTION - COLLECT SEX OFFENDER DOCUMENTS FROM LAW ENFORCEMENT AGENCIES DOCUMENTS ARE SCANNED TO CD THEN DESTROYED SERVES AS STATEWIDE RECORD RETENTION

(Code) (Expenses $ 19,914 including grants of $) (Revenue $)

ACCREDITATION/LEMAP - PROVIDES LAW ENFORCEMENT AGENCIES WITH STANDARDS, WORK WITH AGENCIES TO ACCREDIT AGENCIES ACCORDING TO SET STANDARDS

(Code) (Expenses $ 105,020 including grants of $) (Revenue $ 39,652)

OTHER SMALL PROGRAMS TO INCLUDE MISSING PERSON'S WEBSITE, INTELLIGENCE TRAINING, AND OPERATION CRACKDOWN (PROVIDE LOCAL LAW ENFORCEMENT AGENCIES WITH OVERTIME GRANTS FOR UN-REGISTERED SEX OFFENDER ENFORCEMENT)

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
COLLEEN WILSON PRESIDENT	6 00	X		X				0	0	0
RICHARD LATHIM PAST PRESIDENT	1 00	X		X				0	0	0
JOHN DIDION PRESIDENT ELECT	6 00	X		X				0	0	0
SCOTT SMITH VICE PRESIDENT	2 00	X		X				0	0	0
BRUCE BJORK TREASURER	4 00	X		X				0	0	0
TERRY DAVENPORT TREASURER	4 00	X		X				0	0	0
JOHN BATISTE BOARD MEMBER	1 00	X						0	0	0
LAURA LAUGHLIN BOARD MEMBER	1 00	X						0	0	0
MIKE HARUM BOARD MEMBER	1 00	X						0	0	0
MIKE HUMPHREYS BOARD MEMBER	1 00	X						0	0	0
MIKE KLINE BOARD MEMBER	1 00	X						0	0	0
SAM GRANATO BOARD MEMBER	1 00	X						0	0	0
SUE RAHR BOARD MEMBER	1 00	X						0	0	0
TOM SCHLICKER BOARD MEMBER	1 00	X						0	0	0
ED HOLMES BOARD MEMBER	1 00	X						0	0	0
BILL ELFO BOARD MEMBER	1 00	X						0	0	0
RANDY STEGMEIER BOARD MEMBER	1 00	X						0	0	0
DONALD PIERCE EXECUTIVE DIRECTOR	40 00			X				131,212	0	21,956
RONALD WALTERS REG DIRECTOR SECURITY	40 00					X		107,100	0	14,256
CONSTANTINE MARTIN DIR SECURITY COALITION	40 00					X		158,601	0	17,916
GLEN MOWREY COORDINATOR	40 00					X		105,000	0	12,416

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SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, 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," to 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," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

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

Name of the organization	Employer identification number
WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS	91-0961051

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

2 Political expenditures ▶ $ _____

3 Volunteer hours _____

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 funtion 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 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made 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-

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

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		
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-		

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

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 instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable 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)).

		(a) Yes	(a) No	(b) 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?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		43,843
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			43,843
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
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		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible 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

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i
Also, complete this part for any additional information

Identifier	Return Reference	Explanation

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

Employer identification number
91-0961051

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate 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 may 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" to 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 pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–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 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in 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 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 XIV

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" to 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 XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to 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 Investment earnings or 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 year end balance held as

- a Board designated or quasi-endowment ▶ %
- b Permanent endowment ▶ %
- c Term endowment ▶ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		496,628		496,628
b Buildings		2,716,832	644,546	2,072,286
c Leasehold improvements				
d Equipment		532,872	510,792	22,080
e Other		1,282,615	256,524	1,026,091
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				3,617,085

Part VII Investments—Other Securities. 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
Financial derivatives		
Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 Footnote In Part XIV, 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

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	19,610,657
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,329,951
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	280,706
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	280,706

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	20,764,936
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	1,154,279		
e	Add lines **2a** through **2d**			2e	1,154,279
3	Subtract line **2e** from line **1**			3	19,610,657
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 XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	19,610,657

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	20,484,230
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 XIV)	2d	1,154,279		
e	Add lines **2a** through **2d**			2e	1,154,279
3	Subtract line **2e** from line **1**			3	19,329,951
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 XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	19,329,951

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Part XII, Line 2d - Other Adjustments		COST OF GOODS SOLD REPORTED ON FORM 990, PART VIII, LINE 10B $1,152,866 RENTAL EXPENSE REPORTED ON FORM 990, PART VIII, LINE 6B $1,413
Part XIII, Line 2d - Other Adjustments		COST OF GOODS SOLD REPORTED ON FORM 990, PART VIII, LINE 10B $1,152,866 RENTAL EXPENSE REPORTED ON FORM 990, PART VIII, LINE 6B $1,413

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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," to Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

Employer identification number
91-0961051

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 Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 87

3 Enter total number of other organizations . . . ▶ 0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

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

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 GRANTEES PROVIDE PROGRESS REPORTS PROGRAM MANAGERS ALSO PERFORM SITE VISITS SOME GRANTEES RECEIVE OVERSIGHT VIA ORAL REPORTS/PRESENTATIONS TO AN OVERSIGHT COMMITTEE

Additional Data Return to Form

Software ID:
Software Version:
EIN: 91-0961051
Name: WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
ABERDEEN POLICE210 EAST MARKET STREET ABERDEEN,WA 98520	91-6001226	GOVERNMENT	13,952				CRIMINAL STREET GANG GRANT, GRAFFITI ABATEMENT
ADAMS COUNTY210 WEST BROADWAY RITZVILLE,WA 99169	91-6001294	GOVERNMENT	52,500				ADDRESS VERIFICATION GRANT, TRAFFIC SAFETY GRANT
ASOTIN COUNTYPO BOX 130 ASOTIN,WA 994020130	91-6001295	GOVERNMENT	132,525				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, TRAFFIC SAFETY GRANT
BELLEVUE POLICEPO BOX 90012 BELLEVUE,WA 98009	91-6007020	GOVERNMENT	49,741				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
BELLINGHAM POLICE505 GRAND AVENUE BELLINGHAM,WA 98225	91-6001229	GOVERNMENT	29,196				WA AUTO THEFT PREVENTION GRANT
BENTON COUNTY7122 OKANOGAN PLACE BLDG A KENNEWICK,WA 99336	91-6001296	GOVERNMENT	154,533				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, TRAFFIC SAFETY GRANT
BREMERTON POLICE1025 BURWELL STREET BREMERTON,WA 98337	91-6001231	GOVERNMENT	30,000				WA AUTO THEFT PREVENTION GRANT
BUCKLEY POLICEPO BOX 640 BUCKLEY,WA 98321	91-6001406	GOVERNMENT	31,336				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
CASTLE ROCK POLICEPO BOX 475 CASTLE ROCK,WA 98611	91-6001409	GOVERNMENT	11,464				WA AUTO THEFT PREVENTION GRANT, ADDRESS VERIFICATION GRANT, TRAFFIC SAFETY GRANT
CENTRAL WASHINGTON UNIVERSITY400 EAST UNIVERSITY WAY ELLENSBURG,WA 98926	91-6000618	GOVERNMENT	12,791				WA AUTO THEFT PREVENTION GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
CHEHALIS POLICE350 N MARKET BLVD RM 201 CHEHALIS,WA 98532	91-6001235	GOVERNMENT	31,000				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
CHELAN COUNTY401 WASHINGTON STREET SUITE 1 WENATCHEE,WA 98801	91-6001297	GOVERNMENT	111,676				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, TRAFFIC SAFETY GRANT
CLALLAM COUNTY22 EAST 4TH STREET SUITE 12 PORT ANGELES,WA 98302	91-6001298	GOVERNMENT	123,112				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, TRAFFIC SAFETY GRANT
CLARK COUNTYPO BOX 410 VANCOUVER,WA 98666	91-6001299	GOVERNMENT	286,651				ADDRESS VERIFICATION, PSN ANTI-GANG INITIATIVE, METH INITIATIVE GRANT
COLLEGE PLACE POLICE 625 SOUTH COLLEGE AVENUE COLLEGE PLACE,WA 99324	91-6001412	GOVERNMENT	5,500				TRAFFIC SAFETY GRANT
COLUMBIA COUNTY341 EAST MAIN STREET DAYTON,WA 99328	91-6001309	GOVERNMENT	106,208				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, METH INITIATIVE GRANT
COWLITZ COUNTY312 SW 1ST AVENUE KELSO,WA 98626	91-6001310	GOVERNMENT	130,632				ADDRESS VERIFICATION GRANT, TRAFFIC SAFETY GRANT, METH INITIATIVE GRANT
DOUGLAS COUNTY110 2ND STREET NE SUITE 200 EAST WENATCHEE,WA 98802	91-6001313	GOVERNMENT	130,059				ADDRESS VERIFICATION GRANT, TRAFFIC SAFETY GRANT
EDGEWOOD POLICE2224-104TH AVENUE E EDGEWOOD,WA 983721513	91-1700053	GOVERNMENT	7,676				MULTI-JURISDICTIONAL GRANT
EDMONDS POLICE250 5TH AVE NORTH EDMONDS,WA 98020	91-6001244	GOVERNMENT	32,649				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
ENUMCLAW POLICE1705 WELLS STREET ENUMCLAW,WA 98022	91-6001247	GOVERNMENT	7,676				MULTI-JURISDICTIONAL GRANT
EVERETT POLICE3002 WETMORE AVENUE EVERETT,WA 98201	91-6001248	GOVERNMENT	73,780				WA AUTO THEFT PREVENTION GRANT, GRAFFITI ABATEMENT GRANT
FEDERAL WAY POLICEPO BOX 9718 FEDERAL WAY,WA 98063	91-1462550	GOVERNMENT	40,030				WA AUTO THEFT PREVENTION GRANT, GRAFFITI ABATEMENT GRANT, TRAFFIC SAFETY GRANT
FERRY COUNTYPO BOX 1099 REPUBLIC,WA 99166	91-6001314	GOVERNMENT	120,262				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, METH INITIATIVE GRANT
FIFE POLICE3737 PACIFIC HIGHWAY EAST FIFE,WA 98424	91-6012977	GOVERNMENT	33,477				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
FRANKLIN COUNTY1016 NORTH 4TH AVENUE PASCO,WA 99301	91-6001315	GOVERNMENT	120,542				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, TRAFFIC SAFETY GRANT
GARFIELD COUNTYPO BOX 338 POMEROY,WA 99347	91-6001318	GOVERNMENT	87,630				RURAL DRUG TASK FORCE GRANT, METH INITIATIVE GRANT
GRANITE FALLS POLICEPO BOX 64 GRANITE FALLS,WA 98252	91-6001439	GOVERNMENT	5,773				TRAFFIC SAFETY GRANT, GRAFFITI ABATEMENT GRANT
GRANT COUNTYPO BOX 37 EPHRATA,WA 98823	91-6001319	GOVERNMENT	133,484				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, GRAFFITI ABATEMENT GRANT
GRAYS HARBOR COUNTY PO BOX 630 MONTESANO,WA 98563	91-6001320	GOVERNMENT	186,164				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, METH INITIATIVE GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
ISLAND COUNTYPO BOX 5000 COUPEVILLE,WA 98277	91-6001321	GOVERNMENT	106,905				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, TRAFFIC SAFETY GRANT
JEFFERSON COUNTY79 ELKINS ROAD PORT HADLOCK,WA 98339	91-6001322	GOVERNMENT	81,720				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, TRAFFIC SAFETY GRANT
KELSO POLICE201 SOUTH PACIFIC AVE KELSO,WA 98626	91-6001252	GOVERNMENT	23,877				ADDRESS VERIFICATION GRANT
KENNEWICK POLICEPO BOX 6108 KENNEWICK,WA 99336	91-6001254	GOVERNMENT	37,364				WA AUTO THEFT PREVENTION GRANT, GRAFFITI ABATEMENT GRANT, TRAFFIC SAFETY GRANT
KENT POLICE220 4TH AVENUE SOUTH KENT,WA 98032	91-6001254	GOVERNMENT	1,036,268				WA AUTO THEFT PREVENTION GRANT, GRAFFITI ABATEMENT GRANT, TRAFFIC SAFETY GRANT
KING COUNTY516 3RD AVENUE SEATTLE,WA 98104	91-6001337	GOVERNMENT	946,643				PSN ANTI-GANG INITIATIVE GRANT, PSN GRANT, WA AUTO THEFT PREVENTION GRANT
KIRKLAND POLICE123 5TH AVENUE KIRKLAND,WA 98033	91-6001255	GOVERNMENT	51,060				WA AUTO THEFT PREVENTION GRANT
KITSAP COUNTY614 DIVISION STREET PORT ORCHARD,WA 98366	91-6001348	GOVERNMENT	227,460				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, WA AUTO THEFT PREVENTION GRANT
KITTITAS COUNTY205 WEST 5TH AVENUE SUITE 1 ELLENSBURG,WA 98926	91-6001349	GOVERNMENT	75,232				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, WA AUTO THEFT PREVENTION GRANT
KLICKITAT COUNTY205 S COLUMBUS AVENUE ROOM 108 GOLDENDALE,WA 98620	91-6001350	GOVERNMENT	74,595				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT, TRAFFIC SAFETY GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
LAKE STEVENS POLICEPO BOX 790 LAKE STEVENS,WA 982580790	91-6018875	GOVERNMENT	30,667				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
LAKEWOOD POLICE6000 MAIN STREET SW LAKEWOOD,WA 98499	91-1698185	GOVERNMENT	439,756				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
LEWIS COUNTY345 WEST MAIN STREET CHEHALIS,WA 98532	91-6001351	GOVERNMENT	201,745				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, METH INITIATIVE GRANT
LINCOLN COUNTY404 SINCLAIR PO BOX 367 DAVENPORT,WA 99122	91-6001352	GOVERNMENT	150,022				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, RURAL DRUG TASK FORCE GRANT
LONGVIEW POLICE1351 HUDSON STREET LONGVIEW,WA 98632	91-6001367	GOVERNMENT	76,539				ADDRESS VERIFICATION GRANT, WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
LYNWOOD POLICEPO BOX 5008 LYNWOOD,WA 98046	91-6015840	GOVERNMENT	30,790				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
MASON COUNTY419 NORTH 4TH STREET SHELTON,WA 98584	91-6001354	GOVERNMENT	110,397				ADDRESS VERIFICATION GRANT, METH INITIATIVE GRANT
MONROE POLICE818 WEST MAIN STREET MONROE,WA 98272	91-6001464	GOVERNMENT	45,450				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
MOUNT VERNON POLICE 1805 CONTINENTAL PLACE MOUNT VERNON,WA 98273	91-6001260	GOVERNMENT	13,830				GRAFFITI ABATEMENT GRANT, TRAFFIC SAFETY GRANT
OKANOGAN COUNTY123 5TH AVENUE NORTH ROOM 200 OKANOGAN,WA 98840	91-6001355	GOVERNMENT	85,969				ADDRESS VERIFICATION GRANT, TRAFFIC SAFETY GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
OLYMPIA POLICEPO BOX 1967 OLYMPIA,WA 98507	91-6001261	GOVERNMENT	13,875				GRAFFITI ABATEMENT
PACIFIC COUNTYPO BOX 27 SOUTH BEND,WA 98586	91-6001356	GOVERNMENT	188,238				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, METH INITIATIVE GRANT
PASCO POLICEPO BOX 293 PASCO,WA 993015320	91-6001264	GOVERNMENT	31,363				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
PEND ORIELLE COUNTY 331 SOUTH GARDEN AVENUE NORTHPORT,WA 99156	91-6001357	GOVERNMENT	116,189				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, METH INITIATIVE GRANT
PIERCE COUNTY930 TACOMA AVENUE SOUTH TACOMA,WA 98402	91-6001359	GOVERNMENT	885,093				ADDRESS VERIFICATION GRANT, WA AUTO THEFT PREVENTION GRANT, METH INITIATIVE GRANT
PORT ORCHARD POLICE 546 BAY STREET PORT ORCHARD,WA 98366	91-6001487	GOVERNMENT	29,851				WA AUTO THEFT PREVENTION GRANT
PUYALLUP POLICE311 WEST PIONEER PUYALLUP,WA 98371	91-6001274	GOVERNMENT	5,218				WA AUTO THEFT PREVENTION GRANT
REDMOND POLICEPO BOX 97010 REDMOND,WA 98073	91-6001492	GOVERNMENT	158,319				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT
SAN JUAN COUNTYPO BOX 669 FRIDAY HARBOR,WA 98250	91-6001360	GOVERNMENT	29,000				ADDRESS VERIFICATION GRANT
SEATTLE POLICEPO BOX 34986 SEATTLE,WA 98124	91-1461832	GOVERNMENT	73,269				PSN ANTI-GANG INITIATIVE GRANT, CRIMINAL STREET GANG GRANT, WA AUTO THEFT PREVENTION GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
SHORELINE POLICE1206 NORTH 185TH STREET SHORELINE,WA 98133	91-1683880	GOVERNMENT	30,000				WA AUTO THEFT PREVENTION GRANT
SKAGIT COUNTY600 SOUTH THIRD MOUNT VERNON,WA 98273	91-6001361	GOVERNMENT	113,787				ADDRESS VERIFICATION GRANT, TRAFFIC SAFETY GRANT, METH INITIATIVE GRANT
SKAMANIA COUNTYPO BOX 790 STEVENSON,WA 98648	91-6001363	GOVERNMENT	55,570				ADDRESS VERIFICATION GRANT, TRAFFIC SAFETY GRANT, METH INITIATIVE GRANT
SNOHOMISH COUNTY3000 ROCKEFELLER AVENUE MS 606 EVERETT,WA 98201	91-6001368	GOVERNMENT	1,366,063				ADDRESS VERIFICATION GRANT, WA AUTO THEFT PREVENTION GRANT, METH INITIATIVE GRANT
SNOQUALMIE POLICE 34825 SE DOUGLAS STREET SNOQUALMIE,WA 98065	91-6001504	GOVERNMENT	7,633				MULTI-JURISDICTIONAL GRANT
SPOKANE COUNTYPUBLIC SAFETY BLDG 1100 W MALLON SPOKANE,WA 99260	91-6001370	GOVERNMENT	397,915				ADDRESS VERIFICATION GRANT, CRIMINAL STREET GANG GRANT, METH INITIATIVE GRANT
SPOKANE POLICEWEST 1100 MALLON SPOKANE,WA 99260	91-6001280	GOVERNMENT	322,515				WA AUTO THEFT PREVENTION GRANT, GRAFFITI ABATEMENT GRANT
STEVENS COUNTYPO BOX 186 COLVILLE,WA 99114	91-6001372	GOVERNMENT	160,182				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, TRAFFIC SAFETY GRANT
SULTAN POLICEPO BOX 1650 SULTAN,WA 98294	91-6001930	GOVERNMENT	12,000				GRAFFITI ABATEMENT GRANT
SUMNER POLICE1104 MAPLE STREET SUITE 140 SUMNER,WA 98390	91-6001282	GOVERNMENT	27,550				WA AUTO THEFT PREVENTION GRANT, TRAFFIC SAFETY GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
SUNNYSIDE POLICE401 HOMER STREET SUNNYSIDE,WA 98944	91-6001284	GOVERNMENT	83,392				WA AUTO THEFT PREVENTION GRANT, GRAFFITI ABATEMENT GRANT
TACOMA POLICE3701 SOUTH PINE TACOMA,WA 98409	91-6001283	GOVERNMENT	16,507				WA AUTO THEFT PREVENTION GRANT, PSN ANTI-GANG INITIATIVE GRANT
THURSTON COUNTY2000 LAKERIDGE DRIVE SW OLYMPIA,WA 98502	91-6001375	GOVERNMENT	282,156				ADDRESS VERIFICATION GRANT, PSN ANTI-GANG INITIATIVE GRANT
TOPPENISH POLICE1 WEST FIRST AVENUE TOPPENISH,WA 98948	91-6001286	GOVERNMENT	30,000				WA AUTO THEFT PREVENTION GRANT
US MARSHALS SERVICE 700 STEWART STREET SUITE 900 SEATTLE,WA 98101	000000000	GOVERNMENT	5,316				PSN ANTI-GANG INITIATIVE GRANT
VANCOUVER POLICEPO BOX 1995 VANCOUVER,WA 98668	91-6001288	GOVERNMENT	352,160				WA AUTO THEFT PREVENTION GRANT, PSN ANTI-GANG INITIATIVE GRANT, TRAFFIC SAFETY GRANT
WAHKIAKUM COUNTY64 MAIN STREET PO BOX 65 CATHLAMET,WA 98612	91-6001377	GOVERNMENT	74,514				RURAL DRUG TASK FORCE GRANT
WALLA WALLA COUNTY240 WEST ALDER SUITE 101 WALLA WALLA,WA 99362	91-6001381	GOVERNMENT	202,247				ADDRESS VERIFICATION GRANT, RURAL DRUG TASK FORCE GRANT, WA AUTO THEFT PREVENTION GRANT
WAPATO POLICE205 SOUTH SIMCOE AVENUE WAPATO,WA 98951	91-6001524	GOVERNMENT	8,402				GRAFFITI ABATEMENT GRANT
WASHINGTON STATE DEPT OF CORRECTIONSPO BOX 41100 OLYMPIA,WA 985041100	91-1142111	GOVERNMENT	55,736				PSN ANTI-GANG INITIATIVE GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code 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 non-cash assistance	**(h)** Purpose of grant or assistance
WASHINGTON STATE PATROLPO BOX 42601 OLYMPIA,WA 98504	91-0001127	GOVERNMENT	315,969				WA AUTO THEFT PREVENTION GRANT
WENATCHEE POLICEPO BOX 519 WENATCHEE,WA 98807	91-6001291	GOVERNMENT	9,673				TRAFFIC SAFETY GRANT, MULTI-JURISDICTIONAL GRANT
WESTERN WA UNIVERSITY POLICE2001 BILL MACDONALD PARKWAY BELLINGHAM,WA 98225	91-6000562	GOVERNMENT	5,199				TRAFFIC SAFETY GRANT
WHATCOM COUNTY311 GRAND AVENUE BELLINGHAM,WA 98225	91-6001383	GOVERNMENT	179,956				METH INITIATIVE GRANT, ADDRESS VERIFICATION GRANT
WHITMAN COUNTYPO BOX 470 COLFAX,WA 99111	91-6001384	GOVERNMENT	78,524				METH INITIATIVE GRANT, ADDRESS VERIFICATION GRANT
YAKIMA COUNTYPO BOX 1388 YAKIMA,WA 98907	91-6001387	GOVERNMENT	492,694				ADDRESS VERIFICATION GRANT, CRIMINAL STREET GANG GRANT, WA AUTO THEFT PREVENTION GRANT
YAKIMA POLICE200 S 3RD STREET YAKIMA,WA 98901	91-6001293	GOVERNMENT	144,166				WA AUTO THEFT PREVENTION GRANT

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

Employer identification number
91-0961051

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all 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 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	☑ Compensation committee	☑ Written employment contract		
	☐ Independent compensation consultant	☑ Compensation survey or study		
	☐ Form 990 of other organizations	☑ Approval by the board or compensation committee		
4	During the year, did any person listed in 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?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	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) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in 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?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to 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 Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(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 reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
DONALD PIERCE	(i)	131,212	0	0	14,000	7,956	153,168	0
	(ii)	0	0	0	0	0	0	0
CONSTANTINE MARTIN	(i)	158,601	0	0	9,960	7,956	176,517	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation

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SCHEDULE N (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Liquidation, Termination, Dissolution or Significant Disposition of Assets

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, lines 31 or 32 or Form 990-EZ, line 36.**
▶ **Attach certified copies of any articles of dissolution, resolutions or plans.**
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

Employer identification number
91-0961051

Part I **Liquidation, Termination or Dissolution.** Complete if the organization answered "Yes" to Form 990, Part IV, line 31, or Form 990-EZ, line 36. Use Schedule N-1 if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity

			Yes	No
2	Did or will any officer, director, trustee, or key employee of the organization			
a	Become a director or trustee of a successor or transferee organization?	2a		
b	Become an employee of, or independent contractor for, a successor or transferee organization?	2b		
c	Become a direct or indirect owner of a successor or transferee organization?	2c		
d	Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?	2d		
e	If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III ▶			

Part I Liquidation, Termination or Dissolution *(continued)*

Note. If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B) should equal -0-

			Yes	No
3	Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III	3		
4a	Did the organization request or receive a determination letter from EO Determinations that the organization's exempt status was terminated?	4a		
b	(If "Yes," provide the date of the letter ▶_____)			
5a	Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?	5a		
b	If "Yes," did the organization provide such notice?	5b		
6	Did the organization discharge or pay all liabilities in accordance with state laws?	6		
7a	Did the organization have any tax-exempt bonds outstanding during the year?	7a		
b	Did the organization discharge or defease tax-exempt bond liabilities in accordance with the Internal Revenue Code and state laws?	7b		
c	If "Yes," describe in Part III how the organization defeased or otherwise settled these liabilities If "No," explain in Part III			

Part II Sale, Exchange, Disposition or Other Transfer of More Than 25% of the Organization's Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 32, or Form 990-EZ, line 36. Use Schedule N-1 if additional space is needed.

1 (a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity
CASH	12-31-2009	12,619,224	COST			GOVERNMENT

			Yes	No
2	Did or will any officer, director, trustee, or key employee of the organization			
a	Become a director or trustee of a successor or transferee organization?	2a		
b	Become an employee of, or independent contractor for, a successor or transferee organization?	2b		
c	Become a direct or indirect owner of a successor or transferee organization?	2c		
d	Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?	2d		
e	If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III			

Part III **Supplemental Information.** Complete to provide the information required by Part I, lines 2e, 7c; Part II, line 2e; and any additional information.

Identifier	Return Reference	Explanation
		DURING THE TAXABLE YEAR ENDED DECEMBER 31, 2009, WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS MADE GRANTS OF $12,609,224 THESE AMOUNTS WERE EXPENDED IN THE ORDINARY COURSE OF THE OPERATION OF ITS EXEMPT FUNCTION ACTIVITIES BUT REPRESENTS OVER 25% OF THE ORGANIZATION'S NET ASSETS OF $2,764,411 AT THE BEGINNING OF THE TAXABLE YEAR ENDED DECEMBER 31, 2009 THESE EXPENDITURES DO NOT CONSTITUTE A "SUBSTANTIAL CONTRACTION" UNDER THE DEFINITION IN REG SEC 1 6043-3 AS THE GRANTS WERE PAID OUT OF CURRENT INCOME THERE IS NO PLAN TO LIQUIDATE OR CONTRACT THE ORGANIZATION

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SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
WASHINGTON ASSOCIATION OF SHERIFFS AND POLICE CHIEFS

Employer identification number
91-0961051

Identifier	Return Reference	Explanation
Form 990, Part III, line 3	Changes in Program Services	THE GANG/GRAFITTI ABATEMENT PROGRAM ENDED IN JUNE 2009 THE MAPPING PROGRAM TRANSITIONED FROM THE MAPPING OF MIDDLE AND ELEMENTARY SCHOOLS TO THE MAPPING OF COMMUNITY COLLEGES
Form 990, Part VI, Section A, line 6		ACTIVE MEMBERS ARE THE PRINCIPAL MEMBERS OF A LAW ENFORCEMENT AGENCY (SHERIFF, CHIEF, ETC) ASSOCIATE MEMBERS ARE COMMAND STAFF WITHIN A LAW ENFORCEMENT AGENCY (DEPUTY CHIEF, CRIMINAL DEPUTY, ETC) AFFILIATE MEMBERS ARE ASSOCIATED WITH LAW ENFORCEMENT BUT ARE NOT COMMISSIONED
Form 990, Part VI, Section A, line 7a		ACTIVE MEMBERS HAVE VOTING RIGHTS ASSOCIATE MEMBERS DO NOT HAVE VOTING RIGHTS AFFILIATE MEMBERS ARE ASSOCIATED WITH LAW ENFORCEMENT BUT ARE NOT COMMISSIONED
Form 990, Part VI, Section A, line 7b		RESOLUTIONS MUST BE APPROVED BY A VOTE OF THE MEMBERSHIP
Form 990, Part VI, Section B, line 11		THE FORM 990 IS PREPARED IN CONJUNCTION WITH AN ACCOUNTING FIRM AND PRESENTED TO THE TREASURER AND EXECUTIVE DIRECTOR WHO REVIEW IT PRIOR TO BEING REVIEWED BY THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS THE WHOLE BOARD DOES NOT RECIEVE A COPY OF THE FORM 990 BEFORE IT IS FILED WITH THE IRS
Form 990, Part VI, Section B, line 12c		ALL BOARD MEMBERS COMPLETE THE CONFLICT OF INTEREST POLICY ANNUALLY IF A POTENTIAL CONFLICT OF INTEREST ARISES, THE DISINTERESTED PARTIES OF THE EXECUTIVE COMMITTEE SHALL MAKE A DETERMINATION AS TO WHETHER A CONFLICT DOES EXIST AND WHAT SUBSEQUENT ACTION IS APPROPRIATE
Form 990, Part VI, Section B, line 15		SALARY COMPARISONS FOR ALL POSITIONS (EXCEPT EXECUTIVE DIRECTOR) WERE PERFORMED IN 2007 A PERFORMANCE REVIEW FOR THE EXECUTIVE DIRECTOR WAS PERFORMED IN SEPTEMBER OF 2009 AND INCLUDED A REVIEW OF COMPARABLE SALARIES, REVIEW BY A COMPENSATION COMMITTEE, APPROVAL BY THE BOARD AND A WRITTEN EMPLOYMENT CONTRACT
Form 990, Part VI, Section C, line 19		THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC BY REQUEST REQUESTS ARE REVIEWED FOR VALIDITY BY DIRECTOR OR DEPUTY ONCE APPROVED FOR DISSEMINATION, THE INFORMATION IS PROVIDED

Identifier	Return Reference	Explanation
FORM 990, PART VII	OFFICERS	THE EXECUTIVE DIRECTOR ALSO SERVES AS THE TOP FINANCIAL OFFICIAL THUS THERE IS NO SEPARATE CHIEF FINANCIAL OFFICER LISTED IN PART VII

FORM 990, PART I, LINE 6 THROUGHOUT THE COURSE OF THE YEAR, THERE WERE 17 VOLUNTEER BOARD MEMBERS FORM 990 PART IX COLUMN (D) FUNDRAISING EXPENSES MOST OF OUR FUNDING COMES FROM GOVERNMENT APPROPRIATIONS THUS THERE ARE NO FUNDRAISING EXPENSES