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AMENDED RETURN-SECTION 512(A)(7) REPEAL.

Form **990-T**

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

For calendar year 2017 or other tax year beginning JUL 1, 2017, and ending JUN 30, 2018 1806

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury Internal Revenue Service

OMB No 1545-0687

2017

Open to Public Inspection for 501(c)(3) Organizations Only

A Check box if address changed

B Exempt under section [X] 501(c)(3) 408(e) 220(e) 408A 530(a) 529(a)

Print or Type

Name of organization (Check box if name changed and see instructions.)
GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.

Number, street, and room or suite no. If a P.O. box, see instructions
3939 CAMPBELL AVE

City or town, state or province, country, and ZIP or foreign postal code
ARLINGTON, VA 22206

D Employer identification number (Employees' trust, see instructions) 53-0242992

E Unrelated business activity codes (See instructions) 900002 511120

C Book value of all assets at end of year 143,293,747.

F Group exemption number (See instructions) ▶

G Check organization type ▶ [X] 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity ▶ SEE STATEMENT 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes [X] No

If "Yes," enter the name and identifying number of the parent corporation ▶

J The books are in care of ▶ DAVID PURVIS, SENIOR VP & CFO Telephone number ▶ 703-998-2778

Part I Unrelated Trade or Business Income

			(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c	Capital loss deduction for trusts	4c			
5	Income (loss) from partnerships and S corporations (attach statement)	5			
6	Rent income (Schedule C)	6	479,947.	449,866.	30,081.
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from controlled organizations (Sch. F)	8			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11	55,500.	48,423.	7,077.
12	Other income (See instructions, attach schedule)	12			
13	**Total.** Combine lines 3 through 12	13	535,447.	498,289.	37,158.

Part II Deductions Not Taken Elsewhere

(See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

RECIEVED JUN 29 2020 B604 IRS-OSC OGDEN, UT

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule)	18	
19	Taxes and licenses	19	1,348.
20	Charitable contributions (See instructions for limitation rules) STATEMENT 4 SEE STATEMENT 3	20	2,346.
21	Depreciation (attach Form 4562) 21		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	7,077.
28	Other deductions (attach schedule)	28	
29	**Total deductions.** Add lines 14 through 28	29	10,771.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	26,387.
31	Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 5	31	4,272.
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	22,115.
33	Specific deduction (Generally $1,000, but see line 33 instructions for exceptions)	33	1,000.
34	**Unrelated business taxable income.** Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	21,115.

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Part III Tax Computation

35	**Organizations Taxable as Corporations.** See instructions for tax computation Controlled group members (sections 1561 and 1563) check here ▶ ☐ **See instructions** and:		
a	Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order): (1) $ (2) $ (3) $		
b	Enter organization's share of (1) Additional 5% tax (not more than $11,750) $ (2) Additional 3% tax (not more than $100,000) $		
c	Income tax on the amount on line 34 SEE STATEMENT 6 ▶	35c	3,796.
36	**Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041) ▶	36	
37	**Proxy tax.** See instructions ▶	37	
38	Alternative minimum tax	38	
39	**Tax on Non-Compliant Facility Income.** See instructions	39	
40	**Total.** Add lines 37, 38 and 39 to line 35c or 36, whichever applies 45	40	3,796.

Part IV Tax and Payments

41a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	41a			
b	Other credits (see instructions)	41b			
c	General business credit Attach Form 3800	41c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	41d			
e	**Total credits.** Add lines 41a through 41d			41e	
42	Subtract line 41e from line 40			42	3,796.
43	Other taxes Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)			43	
44	**Total tax.** Add lines 42 and 43 49			44	3,796.
45a	Payments A 2016 overpayment credited to 2017 51a	45a	30,858.		
b	2017 estimated tax payments	45b			
c	Tax deposited with Form 8868	45c			
d	Foreign organizations: Tax paid or withheld at source (see instructions)	45d			
e	Backup withholding (see instructions)	45e			
f	Credit for small employer health insurance premiums (Attach Form 8941)	45f			
g	Other credits and payments ☐ Form 2439 ________ ☐ Form 4136 ________ ☐ Other ________ Total ▶	45g			
46	**Total payments.** Add lines 45a through 45g			46	30,858.
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ ☐			47	
48	**Tax due.** If line 46 is less than the total of lines 44 and 47, enter amount owed ▶			48	
49	**Overpayment.** If line 46 is larger than the total of lines 44 and 47, enter amount overpaid 55 ▶			49	27,062.
50	Enter the amount of line 49 you want **Credited to 2018 estimated tax** ▶ Refunded 56 ▶			50	27,062.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

		Yes	No
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the foreign country here ▶		X
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
53	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ $		

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge

▶ [signature] Signature of officer | 5/8/2020 Date | ▶ SENIOR VP AND CFO Title

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
JULIA FLANNERY	Julia Flannery	5/6/2020		P00928918
Firm's name ▶ RSM US LLP			Firm's EIN ▶ 42-0714325	
Firm's address ▶ 9737 WASHINGTONIAN BLVD, SUITE 400 GAITHERSBURG, MD 20878			Phone no. 301-296-3700	

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Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶ N/A

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	Cost of goods sold. Subtract line 6 from line 5 Enter here and in Part I, line 2	7	
3	Cost of labor	3					
4a	Additional section 263A costs (attach schedule)	4a		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
b	Other costs (attach schedule)	4b					
5	Total. Add lines 1 through 4b	5					

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1. Description of property

(1) TOWER FACILITIES AT ARLINGTON, VA
(2) PRODUCTION STUDIOS FACILITY, ARLINGTON, VA
(3) RADIO STUDIO FACILITY, ARLINGTON, VA
(4)

	2. Rent received or accrued		
	(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) SEE STATEMENT 7
(1)		453,387.	396,073.
(2)		16,300.	22,000.
(3)		10,260.	31,793.
(4)			
Total	0.	Total 479,947.	
(c) Total income Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶		479,947.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶ 449,866.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property (a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)			
(2)			
(3)			
(4)			

	4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)			%		
(2)			%		
(3)			%		
(4)			%		
				Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals			▶	0.	0.
Total dividends-received deductions included in column 8				▶	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

		Exempt Controlled Organizations			
1 Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
Totals ▶			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization
(see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
	Enter here and on page 1, Part I, line 9, column (A)			Enter here and on page 1, Part I, line 9, column (B)
Totals ▶	0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income
(see instructions)

1. Description of exploited activity	2 Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)				Enter here and on page 1, Part II, line 26
Totals ▶	0.	0.				0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) ▶	0.	0.				0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) WETA MAGAZINE	55,500.	48,423.	7,077.	25,560.	632,118.	7,077.
(2)						
(3)						
(4)						
Totals from Part I ▶	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶	55,500.	48,423.				7,077.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		▶	0.

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT 1

RENTAL OF TRANSMISSION FACILITIES, STUDIO, AND PRODUCTION SERVICES.
MAGAZINE ADVERTISING.

TO FORM 990-T, PAGE 1

FOOTNOTES STATEMENT 2

2017 AMENDED FORM 990-T SUPPLEMENTAL STATEMENT

THE FURTHER CONSOLIDATED APPROPRIATION ACT OF 2020 WAS SIGNED INTO LAW ON DECEMBER 20, 2019, WHICH REPEALED IRC SECTION 512(A)(7) RETROACTIVELY TO THE DATE OF ORIGINAL ENACTMENT. GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC. UPDATED FORM 990-T, PART I, LINE 12 TO SHOW $0 IN UNRELATED BUSINESS INCOME FROM TAXABLE FRINGE BENEFITS. THE FOLLOWING ADDITIONAL LINES WERE UPDATED ON THE AMENDED RETURN:

-PART II, LINE 19
-PART II, LINE 20
-PART II, LINE 29

FORM 990-T	CONTRIBUTIONS	STATEMENT 3
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
CASH ONLY	N/A	147,600.
TOTAL TO FORM 990-T, PAGE 1, LINE 20		147,600.

FORM 990-T	CONTRIBUTIONS SUMMARY	STATEMENT 4

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT		
CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS		
FOR TAX YEAR 2012		
FOR TAX YEAR 2013		
FOR TAX YEAR 2014		
FOR TAX YEAR 2015		
FOR TAX YEAR 2016		
TOTAL CARRYOVER		
TOTAL CURRENT YEAR 10% CONTRIBUTIONS	147,600	
TOTAL CONTRIBUTIONS AVAILABLE	147,600	
TAXABLE INCOME LIMITATION AS ADJUSTED	2,346	
EXCESS 10% CONTRIBUTIONS	145,254	
EXCESS 100% CONTRIBUTIONS	0	
TOTAL EXCESS CONTRIBUTIONS	145,254	
ALLOWABLE CONTRIBUTIONS DEDUCTION		2,346
TOTAL CONTRIBUTION DEDUCTION		2,346

FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT 5

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/17	4,272.	0.	4,272.	4,272.
NOL CARRYOVER AVAILABLE THIS YEAR			4,272.	4,272.

FORM 990-T LINE 35C TAX COMPUTATION STATEMENT 6

1.	TAXABLE INCOME		21,115	
2.	LESSER OF LINE 1 OR FIRST BRACKET AMOUNT . .		21,115	
3.	LINE 1 LESS LINE 2		0	
4.	LESSER OF LINE 3 OR SECOND BRACKET AMOUNT . .		0	
5.	LINE 3 LESS LINE 4		0	
6.	INCOME SUBJECT TO 34% TAX RATE		0	
7.	INCOME SUBJECT TO 35% TAX RATE		0	
8.	15 PERCENT OF LINE 2		3,167	
9.	25 PERCENT OF LINE 4		0	
10.	34 PERCENT OF LINE 6		0	
11.	35 PERCENT OF LINE 7		0	
12.	ADDITIONAL 5% SURTAX		0	
13.	ADDITIONAL 3% SURTAX		0	
14.	TOTAL INCOME TAX			3,167
15.	TAX AT 21% RATE EFFECTIVE AFTER 12/31/2017		4,434	
		DAYS		
16.	TAX PRORATED FOR NUMBER OF DAYS IN 2017	184	1,597	
17.	TAX PRORATED FOR NUMBER OF DAYS IN 2018	181	2,199	
18.	TOTAL TAX PRORATED	365		3,796

FORM 990-T DEDUCTIONS CONNECTED WITH RENTAL INCOME STATEMENT 7

DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
RENTAL EXPENSES			396,073.	
	- SUBTOTAL -	1		396,073.
RENTAL EXPENSES			22,000.	
	- SUBTOTAL -	2		22,000.
RENTAL EXPENSES			31,793.	
	- SUBTOTAL -	3		31,793.
TOTAL TO FORM 990-T, SCHEDULE C, COLUMN 3				449,866.