Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

foundations)

Do not enter social security numbers on this form as it may be made public

DLN: 93493193013069 OMB No 1545-0047

2017

•		of the Treasur nue Service	I Information about	t Form 990 and its instructions is at wu	/w IRS gov/	<u>'form990</u>		en to Public Inspection
A F	or th	e 2017 ca	ı alendar year, or tax year begin	ning 09-01-2017 , and ending 08-	31-2018			
B Che	ck ıf a	pplicable change	C Name of organization ASSOCIATION OF WASHINGTON SCH PRINCIPALS			D Employer 91-089102		ation number
□ Ini	me ch Itial ret al returi	-	Doing business as					
		d return on pending	1021 8TH AVE SE	all is not delivered to street address) Room/s	suite	E Telephone r (360) 357		
			City or town, state or province, coun OLYMPIA, WA 98501			G Gross recei	pts \$ 2,5	50,268
			F Name and address of principal SCOTT SEAMAN	officer	H(a) Is	this a group retur	n for	
			1021 8TH AVE SE			ubordinates? re all subordinates		□Yes ☑No
T Ta	x-exer	npt status	OLYMPIA, WA 98501		∣ `´տ	icluded?		☐ Yes ☐No
		<u>'</u>	☐ 501(c)(3)	(insert no)		"No," attach a list roup exemption nu	•	•
K For	n of o	rganızatıon	✓ Corporation ☐ Trust ☐ Associ	ciation Other ►	L Year of f		State of	legal domicile
Pa	rt I	Sumi	marv					
	1 6	= Briefly des	cribe the organization's mission or					
e .]	TO SUPPO	RT PRINCIPALS AND THE PRINCIP	ALSHIP IN THE EDUCATION OF ALL ST	JDENTS			
£	-							
Ě	-							
Governance				continued its operations or disposed of				
	1		-	g body (Part VI, line 1a)			3	13
Activities &	1		•	the governing body (Part VI, line 1b)			4	13
Ĕ	1		• •	endar year 2017 (Part V, line 2a) .			5	23
ਹਿੰ	1		nber of volunteers (estimate if nec	• •			6	35
⋖	1			VIII, column (C), line 12			7a	450
	Ь	Net unrela	ated business taxable income from	Form 990-T, line 34	<u> </u>		7b	-5,232
	_					Prior Year		Current Year
<u>g</u>	1		ions and grants (Part VIII, line 1h)				0	0
Rəvenue	1	-	, , ,)		2,213,519	+	2,537,704
ą.	1		nt income (Part VIII, column (A),	•		9,926		5,864
	1		renue (Part VIII, column (A), lines	•		4,350		6,700
	_			st equal Part VIII, column (A), line 12)		2,227,795	+	2,550,268
	1		nd similar amounts paid (Part IX, c			221,801	+	148,675
	1		oald to or for members (Part IX, co	, ,,			2	0
Expenses	1			nefits (Part IX, column (A), lines 5–10)		1,233,716	+	1,545,669
£	Ι.		nal fundraising fees (Part IX, colur			(7	0
ੜੋ	1		aising expenses (Part IX, column (D), lii	· -		636.000	_	1 000 107
_	1		penses (Part IX, column (A), lines	, ,		636,999	+	1,089,197
	1	•	enses Add lines 13-17 (must equi			2,092,516	+	2,783,541
<u></u>	19	Revenue	less expenses Subtract line 18 fro	im line 12	Regina	135,279 ning of Current Year		-233,273 End of Year
Net Assets or Fund Balances					Begini	ining of current real	1	End of Year
sse.	20	Total asse	ets (Part X, line 16)			6,150,419	9	5,839,089
Ž Ž	21	Total liabi	ılıtıes (Part X, lıne 26)			3,404,100	ס	3,295,809
žĪ	22	Net asset	s or fund balances Subtract line 2	1 from line 20		2,746,319	9	2,543,280
Pai	t II	Signa	ature Block				<u> </u>	
				ned this return, including accompanyin				
any k			f, it is true, correct, and complete	Declaration of preparer (other than of	icer) is base	ed on all information	on or wr	nich preparer has
		TA						
		******* Signati	re of officer			2019-07-11 Date		
Sign Here		, -						
iici	-		SEAMAN EXECUTIVE DIRECTOR r print name and title					
		17	rint/Type preparer's name	Preparer's signature	Date	☐ PTI	N	
Paid	4		HRISTY ENGELMANN	CHRISTY ENGELMANN	Juce	Check 📙 If P00	745224	
		or Fi	ırm's name RSM US LLP			self-employed Firm's EIN ► 42-07	14325	
	pare On	₹! <u> -</u> .	ırm's address ► 1145 BROADWAY PLAZA	A SUITE 900		Phone no (253) 572		
USE	. UII	'' y	TACOMA, WA 9840235	29				
May t	he IP	S discuss	this return with the preparer show				√ v _△	s 🗆 No
			duction Act Notice, see the sep	•	Cat N	lo 11282Y		Form 990 (2017)
			, оср		-u. 11			(/)

Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	Form	990 (2017)					Page 2
1 Berêfy describe the organization's mission AMOSP PROVIDED SASISTANCE TO ENSURE THAT ALL SCHOOLS IN THE STATE OF WASHINGTON HAVE THE LEADERSHIP & SUPPORT NECESSARY TO ACHIEVE EQUITY & EXCELLENCE IN STUDENT LEARNING 2 Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-E27	Par	t IIII State	ment of Program Ser	vice Accomplisi	hments		
ACCIDENT RESTRETANCE TO ENSURE THAT ALL SCHOOLS IN THE STATE OF WASHINGTON HAVE THE LEADERSHIP & SUPPORT NECESSARY TO ACCHIEVE EQUITY R EXCELLENCE IN STUDENT LEARNING 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?		Check	ıf Schedule O contains a re	sponse or note to a	any line in this Part III		🗆
ACHIEVE EQUITY & EXCELLENCE IN STUDENT LEARNING 2 Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-E27	1	Briefly describ	oe the organization's missio	n			
the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Joint the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O If "Yes," describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses section \$01(c)(3) and \$01(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses 5 2,726,032 including grants of \$) (Revenue \$ 2,543,984) 4b (Code) (Expenses 5 including grants of \$) (Revenue \$) 4c (Code) (Expenses 5 including grants of \$) (Revenue \$) 4d (Code) (Expenses 5 including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	AWS ACHI	P PROVIDES AS EVE EQUITY &	SSISTANCE TO ENSURE THA EXCELLENCE IN STUDENT I	AT ALL SCHOOLS IN LEARNING	N THE STATE OF WASHI	INGTON HAVE THE LEADERSHIP & :	SUPPORT NECESSARY TO
If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?	2	Did the organ	nization undertake any signi	ficant program serv	vices during the year wh	nich were not listed on	
Did the organization cease conducting, or make significant changes in how it conducts, any program services?		the prior Forn	n 990 or 990-EZ?				∐ Yes ☑ No
services?							
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a	3	services? .			changes in how it condu	icts, any program	☐ Yes ☑ No
See Additional Data 4b (Code) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4	Section 501(d	:)(3) and 501(c)(4) organiz	ations are required	to report the amount o		
See Additional Data 4b (Code) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4a	(Code) (Expenses \$	2,726,032	including grants of \$) (Revenue \$	2,543,954)
4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)		•				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)							
(Expenses \$ including grants of \$) (Revenue \$)	4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
(Expenses \$ including grants of \$) (Revenue \$)							
	4d		•	•	\$) (Revenue \$)
	4e	• • •			·		·

or X as applicable

Checklist of Required Schedules

Page 3

No

Nο

Nο

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

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 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

14b

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Yes

Yes

Nο No Nο Yes Nο

Nο Nο Nο No Nο Nο Nο Nο Nο Nο No Nο Form **990** (2017)

29

Form 990 (2017)		Page 4
Part IV Checklist of Required Schedules (continued)	
	Yes	No

20a

Yes

Yes

Νo

Νo

Νo

Nο

Νo

Nο

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 💆

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20b 21

22

23

24a

24b

24c

24d

25a

25b

26

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28a

28b

28c

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35a

35h

36

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Yes

Yes

Yes

Form 990 (2017)

JIIII :	990 (2017)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 33			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
	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	2b	Yes	
	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 (see instructions)	20	165	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3ь		
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
	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		50		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	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).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
_		7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
	1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
		8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
_	12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
c		, ,		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

orm	990 (2017)			Page 6
Part	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to lı	nes ✓
Se	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 13			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
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 governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	2.)	_
	Ţ	\longrightarrow	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	=		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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?			
	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 15a or 15b, describe the process in Schedule O (see instructions)			
	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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	166		
So.	ction C. Disclosure	16b		
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 made these available. Check all that apply			
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records SCOTT SEAMAN 1021 8TH AVENUE SE OLYMPIA, WA 98501 (360) 357-7951			
				0 /00/=

Part VII

EXECUTIVE DIRECTOR

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

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

- year
- 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 director organization, more than \$10,000 of reportable control 										
List persons in the following order individual trus compensated employees, and former such person		rs, ınstı	itutio	nal t	rust	ees,	offic	ers, key employees	s, highest	
\square Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	any	current officer, dire	ctor, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours	pers	an on on is	e bo botl	t che x, u n an	eck m inless office ustee	er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) KEN C SCHUTZ PRESIDENT	1 00	x		x				0	0	0
(2) CAMERON L GROW PRESIDENT ELECT	1 00	x		×				0	0	0
(3) KELLEY M BOYD PAST PRESIDENT	1 00	х						0	0	0
(4) HEATHER R RENNER BUDGET CHAIR	1 00	х						0	0	0
(5) HEIDI SUE SUTTON ESPAW PRESIDENT	1 00	×						0	0	0
(6) CHRISTOPHER T VISSERMAN ESPAW VICE PRESIDENT	1 00	х						0	0	0
(7) DAVID W JONES ESPAW PAST PRESIDENT	1 00	х						0	0	0
(8) PATRICIA J KANNBERG ESPAW 3-YR REP	1 00	x						0	0	0

PAST PRESIDENT	•••••	×			0	0	0
(4) HEATHER R RENNER BUDGET CHAIR	1 00	x			0	0	0
(5) HEIDI SUE SUTTON ESPAW PRESIDENT	1 00	×			0	0	0
(6) CHRISTOPHER T VISSERMAN ESPAW VICE PRESIDENT	1 00	x			0	0	0
(7) DAVID W JONES ESPAW PAST PRESIDENT	1 00	х			0	0	0
(8) PATRICIA J KANNBERG ESPAW 3-YR REP	1 00	х			0	0	0
(9) NATHAN D PLUMMER AWMLP PRESIDENT	1 00	x			0	0	0
(10) TODD A HILMES AWMLP VICA PRESIDENT	1 00	х			0	0	0
(11) ANDREW S CAIN AWMLP PAST PRESIDENT	1 00	х			0	0	0
(12) MICHAEL J HARRINGTON AWMLP 3-YR REP	1 00	х			0	0	0
(13) W BRENT OSBORN WASSP PRESIDENT	1 00	х			0	0	0
(14) JOHN H BELCHER	1 00	l			0	0	

		ı.	181कर		nsated			
(1) KEN C SCHUTZ PRESIDENT	1 00	×		×		0	0	0
(2) CAMERON L GROW PRESIDENT ELECT	1 00	×		x		0	0	0
(3) KELLEY M BOYD PAST PRESIDENT	1 00	х				0	0	0
(4) HEATHER R RENNER BUDGET CHAIR	1 00	x				0	0	0
(5) HEIDI SUE SUTTON ESPAW PRESIDENT	1 00	×				0	0	0
(6) CHRISTOPHER T VISSERMAN ESPAW VICE PRESIDENT	1 00	x				0	0	0
(7) DAVID W JONES ESPAW PAST PRESIDENT	1 00	x				0	0	0
(8) PATRICIA J KANNBERG ESPAW 3-YR REP	1 00	x				0	0	0
(9) NATHAN D PLUMMER AWMLP PRESIDENT	1 00	x				0	0	0
(10) TODD A HILMES AWMLP VICA PRESIDENT	1 00	х				0	0	0
(11) ANDREW S CAIN AWMLP PAST PRESIDENT	1 00	х				0	0	0
(12) MICHAEL J HARRINGTON AWMLP 3-YR REP	1 00	x				0	0	0
(13) W BRENT OSBORN WASSP PRESIDENT	1 00	x				0	0	0
(14) JOHN H BELCHER WASSP VICE PRESIDENT	1 00	х				0	0	0
(15) CHRISTY M COLE WASSP PAST PRESIDENT	1 00	x				0	0	0
(16) AARON FLETCHER WASSP 3-YR REP	1 00	x				0	0	0
(17) GARY KIPP	40 00							22.654

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee)

23,654

130.380

compensation from the organization ▶ 0

Part VII

(F) Estimated

Page 8

	(A) Name and Title	(B) Average hours per week (list any hours	than c	ne b	ox, ı ın of	t cho unle: ficer	and a	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensatio from related organization	on d is	Estima amount of compen from	ated of other sation the
		for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated emptovies	Former	2/1099-MISC)	(W- 2/1099 MISC)	-	organizat relat organiz	:ed
·	SCOTT SEAMAN LUTIVE DIRECTOR DESIGNATE	40 00	l		х				80,429		0		0
											_		
											\dashv		
											\exists		
											\dashv		
c	Sub-Total	VII, Section A		•		•			210,809	(23,654
2	Total number of individuals (including bu of reportable compensation from the org	t not limited to		sted a	abov	/e) v	vho re	ceiv	<u>'</u>	,000			
3	Did the organization list any former offic line 1a ⁷ If "Yes," complete Schedule J for			key (emp	loye •	e, or h	nighe	est compensated er	nployee on	3	Yes	No No
4	For any individual listed on line 1a, is the organization and related organizations gi									ne	4	Yes	
5	Did any person listed on line 1a receive of services rendered to the organization? If									lual for	5	1.55	No
	ection B. Independent Contractors												
1	Complete this table for your five highest from the organization Report compensal	ion for the cale								tax year	npens		
	Name and	(A) business address							Descript	(B) ion of services	\dashv	(C Compen	
											\dashv		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

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

(B) Average

Part '	VII										
		Check if Schedul	e O contains :	a respo	onse or note to any	(his Part VIII A) revenue	Rel ex	(B) ated or cempt	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	-	F-1							venue	Tevende	512-514
ats Str		Federated campaig		1a	<u> </u>						
rar		Membership dues		1b	<u> </u>						
š. G Am		Fundraising events		1c							
iii Ia		Related organizatio		1d	<u> </u>						
s, (imi		Government grants (co		1e	<u> </u>						
ion	1	 All other contributions, and similar amounts n 	ot included	1f							
Contributions, Gifts, Grants and Other Similar Amounts	و	above Noncash contribution in lines 1a-1f \$	ons included								
<u>G</u> <u>E</u>	h	Total.Add lines 1a-1	.f		•						
<u> 3</u>					Business	Code					
۲.	2 a	MEMBERSHIP DUES				541900	1,8	91,904	1,891	,904	
å	b	CONFERENCES				611710		83,712		,712	
AC.		PARTNERSHIP PROGRAM	νî			541900 611710		43,485 18,895		i,485 i,895	
3		WORKSHOP SUPPORT CONTRIBUTIONS				541900		870	16	870	
æ						341700		-1,162	-1	,162	
Program Service Revenue	f	All other program se	rvice revenue		2 5	 37,704				,	
4		Total.Add lines 2a-21			<u> </u>	-		1			
		investment income (ii imilar amounts) .			interest, and other		5,864				5,864
		income from investme			ond proceeds ►						
	5 F	Royalties									
			(ı) Rea	l	(II) Personal						
	6a	Gross rents									
	b	Less rental expenses				1					
	c	Rental income or				+					
		(loss)	(1)			_					
	u	Net rental income o	r (loss) (ı) Securit		(II) Other						
	7a	Gross amount from sales of assets other than inventory	(I) Securit	lies	(II) Other						
		Less cost or other basis and sales expenses									
		Gain or (loss) Net gain or (loss)				-					
		Gross income from fi			<u> </u>						
Other Revenue		(not including \$ contributions reporte See Part IV, line 18	ed on line 1c)	of							
æ		Less direct expense		b							
her		Net income or (loss)		-	ents						
ğ	Уa	Gross income from g See Part IV, line 19									
	b	Less direct expense	c	a b		-					
		Net income or (loss)				_					
		Gross sales of invent	ory, less			1					
		returns and allowand	ces	a							
	b	Less cost of goods s	sold	b]					
	С	Net income or (loss)		invent							
		Miscellaneous	Revenue		Business Code		6.250		6 250		
	11	OTHER INCOME			900099	9	6,250		6,250		
	b	ADVERTISING INCO	ME		541800		450			450	
	c										
	-										
	d	All other revenue .									
	е	Total. Add lines 11a	-11d		>		6,700				
	12	Total revenue. See	Instructions				2,550,268		2,543,954	450	5,864
					·		2,550,268	'[2,543,954	450	5,864 Form 990 (2017)

art IX Statement of Functional Expenses

orm 990 (2017)				Page 1
Part IX Statement of Functional Expenses ection 501(c)(3) and 501(c)(4) organizations must complete all col	umns All other orga	nızatıons must com	plete column (A)	
Check if Schedule O contains a response or note to any l	line in this Part IX		<u></u>	<u> </u>
Do not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	148,675	·		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	172,231			
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	1,125,916			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	46,178			
9 Other employee benefits	102,978			
LO Payroll taxes	98,366			
L1 Fees for services (non-employees)				
a Management				
b Legal	10,924			
c Accounting	26,153			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	66,600			
.2 Advertising and promotion				
3 Office expenses	133,430			
.4 Information technology				
.5 Royalties				
. 6 Occupancy	51,710			
. 7 Travel	62,350			
.8 Payments of travel or entertainment expenses for any federal, state, or local public officials				
.9 Conferences, conventions, and meetings	321,095			
20 Interest	819			
11 Payments to affiliates	013			
22 Depreciation, depletion, and amortization	114,089			
23 Insurance	114,005			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a BOARD AND COMMITTEE	138,557			
b REPAIRS AND MAINTENANCE	134,527			
c MEMBERSHIPS & TRAINING	20,288			
d BUSINESS TAXES	8,655			
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	2,783,541			
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2017)

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Liabilities 22

Fund Balances

Assets or 30

Net

Intangible assets

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

Total assets.Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

222.907

5.839.089

3,108,169

151.619

3,295,809

2.543.280

2,543,280

5.839.089

Form **990** (2017)

36,021

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34

6.150.419

2,956,461

8.540

319.142

3,404,100

2.746.319

2,746,319

6.150.419

119.957

Page **11**

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

	Beginning of year		End of year
Cash-non-interest-bearing		1	
Savings and temporary cash investments	2,885,646	2	1,
Pladges and grants receivable, not		2	

2	Savings and temporary cash investments	2,885,646	2	1,957,057
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	2,686,299	4	2,749,396
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets Notes and loans receivable, net 120.198 Inventories for sale or use . 8

560,000 225.779 9 15,670 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a 597,525 basis Complete Part VI of Schedule D 334,059

263,466 138.774 b Less accumulated depreciation 10b 10c 93.723 11 Investments—publicly traded securities . 11 12 12 Investments—other securities See Part IV, line 11 . 13 13 Investments-program-related See Part IV, line 11

☐ Cash ☑ Accrual ☐ Other 1 Accounting method used to prepare the Form 990 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 Νo

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis Consolidated basis ☐ Both consolidated and separate basis

2b Nο

3a

3b

Nο

Form 990 (2017)

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

b Were the organization's financial statements audited by an independent accountant? consolidated basis, or both

Separate basis Consolidated basis ☐ Both consolidated and separate basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version: **EIN:** 91-0891029

Name: ASSOCIATION OF WASHINGTON SCHOOL

PRINCIPALS

Form 990 (2017)

PRINCIPALSHIP AND EMERGING ISSUES THAT MAY AFFECT PRINCIPALS

Form 990, Part III, Line 4a:

AWSP PROVIDES MEMBERSHIP SERVICES TO 4.113 MEMBERS MEMBERSHIP SERVICES INCLUDE PROFESSIONAL RESPONSIBILITIES AND RIGHTS RECOMMENDATIONS.

ACCESS TO JOB POSTINGS BY DISTRICTS ON OUR WEB SITE AWSP ALSO PROVIDES TIMELY AND TOPICAL INFORMATION TO MEMBERSHIP ON BEST PRACTICES IN THE

SCHEDULE C

Political Campaign and Lobbying Activities

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

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

91-0891029

Employer identification number

OMB No 1545-0047

DLN: 93493193013069

Open to Public Inspection

Department of the Treasury ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at Internal Revenue Service www.irs.gov/form990.

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

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

Section 527 organizations Complete Part I-A only

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

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

 Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c

(Proxy Tax) (see separate instructions), then

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

Name of the organization

ASSOCIATION OF WASHINGTON SCHOOL PRINCIPALS

Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A

Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

Political campaign activity expenditures (see instructions)

Volunteer hours for political campaign activities (see instructions)

Complete if the organization is exempt under section 501(c)(3).

1 2

Enter the amount of any excise tax incurred by the organization under section 4955

Enter the amount of any excise tax incurred by organization managers under section 4955

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

Was a correction made?

If "Yes," describe in Part IV

(Form 990 or 990-

EZ)

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

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

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

3

(a) Name

Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(b) Address

(c) EIN

(d) Amount paid from

filing organization's

funds If none, enter

-0-

enter -0-

☐ Yes

□ No

5

2

3

3

organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount

of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

(e) Amount of political
contributions received
and promptly and
directly delivered to a

(e) Amount of political
contributions received
and promptly and

(e) Amount of political
contributions received
and promptly and
directly delivered to a
separate political
organization If none,

5

2

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2017 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes Nο Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? C Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? q Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 1 Yes 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? No 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? No Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 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 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)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference

PART III-A, LINE 1

MORE THAN 90% OF THE MEMBERSHIP DUES COLLECTED BY AWSP ARE PAID BY LOCAL GOVERNMENTS AWSP ADVOCATES ON BEHALF OF ITS MEMBERS THROUGH ITS GOVERNMENTAL RELATIONS EFFORT, WHICH FOCUSES ON TRACKING LEGISLATIVE UPDATES AND OTHER ISSUES PERTAINING TO MEMBERS

AWSP'S MEMBERSHIP DUES SUPPORT THE COMMITTEE

PROMOTING THE ORGANIZATION'S LEGISLATIVE PLATFORM, AND SUPPORTING CANDIDATES FOR OFFICE AWSP ALSO WORKS IN CONJUNCTION WITH ITS AFFILIATE POLITICAL ACTION COMMITTEE, THE AWSP-WASHINGTON SCHOOL PRINCIPALS LEGISLATIVE EFFECTIVENESS ASSOCIATION (AWSP-WSPLEA) THE POLITICAL ACTION COMMITTEE IS FUNDED BY VOLUNTARY CONTRIBUTIONS FROM MEMBERS NONE OF

Explanation

Schedule C (Form 990 or 990EZ) 2017

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
SCHEDULE D | Supplemental Final

Supplemental Financial Statements

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

2017

DLN: 93493193013069

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

pen to Public Inspection

Name of the organization ASSOCIATION OF WASHINGTON SCHOOL			Employer identification number
PRINCIPALS			91-0891029
Part I Organizations Maintaining Donor Adv			Accounts.
Complete if the organization answered "Y	es" on Form 990, Part IV, (a) Donor advised		(b)Funds and other accounts
Total number at end of year	(a) Donor advised	Turius	(b) Funds and other accounts
Aggregate value of contributions to (during year)			
Aggregate value of grants from (during year)			
Aggregate value at end of year			
	Language that the accets	hald in danas adv	wood funds are the
organization's property, subject to the organization's e	xclusive legal control?		☐ Yes ☐ No
Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?			
Part II Conservation Easements. Complete if t	he organization answered	l "Yes" on Form	990, Part IV, line 7.
Purpose(s) of conservation easements held by the orga	anization (check all that apply	/)	
\square Preservation of land for public use (e g , recreation	on or education) 🔲 Pr	eservation of an l	nistorically important land area
Protection of natural habitat	☐ Pr	eservation of a ce	ertified historic structure
Preservation of open space			
Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contr	ibution in the forr	n of a <u>conservation</u> 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 histor	ric structure included in (a)		2c
d Number of conservation easements included in (c) acquistructure listed in the National Register	ured after 8/17/06, and not o	on a historic	2d
Number of conservation easements modified, transferr tax year ▶	ed, released, extinguished, o	r terminated by t	he organization during the
Number of states where property subject to conservati	on easement is located >		
Number of states where property subject to conservation Does the organization have a written policy regarding to and enforcement of the conservation easements it hold		ection, handling o	f violations, Yes No
Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of violations,	and enforcing cor	
Amount of expenses incurred in monitoring, inspecting	, handling of violations, and e	enforcing conserv	ation easements during the year
Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?) above satisfy the requireme	ents of section 17	0(h)(4)(B)(ı) ☐ Yes ☐ No
In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organizatior		se statement, and
art III Organizations Maintaining Collections Complete if the organization answered "You			er Similar Assets.
a If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held fo provide, in Part XIII, the text of the footnote to its fina	r public exhibition, education,	, or research in fu	
b If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for pul following amounts relating to these items			
(i) Revenue included on Form 990, Part VIII, line 1			▶ \$
(ii) Assets included in Form 990, Part X			▶ \$
If the organization received or held works of art, histor			
	, , , ,		▶ \$
b Assets included in Form 990, Part X			▶ \$
following amounts required to be reported under SFAS a Revenue included on Form 990, Part VIII, line 1	116 (ASC 958) relating to th	ese items	► \$

Pai	t III	Organizations Maintaining Col	lections of Art,	Histori	cal Tre	asures, or	Other	Similar As	sets (co	ontinued)	
3		g the organization's acquisition, accession s (check all that apply)	n, and other record	s, check	any of th	e following t	hat are a	sıgnıfıcant u	se of its	collection	
а		Public exhibition		d		oan or excha	ange prog	ırams			
b		Scholarly research		е		Other					
c		Preservation for future generations									
4	Prov Part	ide a description of the organization's col XIII	lections and explair	n how the	y furthe	r the organiz	ation's ex	kempt purpo:	se in		
5		ng the year, did the organization solicit o ts to be sold to raise funds rather than to						ular	☐ Yes	N	lo
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		orm 990	, Part I\	V, line 9, oi	r reporte	ed an amou	nt on Fo	orm 990,	Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other interme	ediary for	contribu	tions or othe	er assets	not	☐ Yes		lo
ь	If "Y	es," explain the arrangement in Part XIII	and complete the	following	table			Aı	mount		_
c	Begii	nning balance	·				1c				_
d	Addı	tions during the year					1d				_
e	Dıstr	abutions during the year					1e				_
f	Endi	ng balance					1f				
2 a	Did t	he organization include an amount on Fo	rm 990, Part X, line	e 21, for	escrow o	r custodial a	ccount lia	ability?	☐ Yes	. 🗆	– In
b		es," explain the arrangement in Part XIII									
Pa	art V	Endowment Funds. Complete if	-								
1-	D. a. a.	ning of vary balance	(a)Current year	(b) P	rior year	(c)Two ye	ears back	(d)Three yea	rs back ((e) Four yea	rs back
	_	ning of year balance									
		butions									
		vestment earnings, gains, and losses									
		s or scholarships				+					
	and pi	expenditures for facilities rograms									
		nistrative expenses									
g	End of	f year balance									
2		ide the estimated percentage of the curre	ent year end balanc	e (line 1	g, columi	n (a)) held a	s				
а	Boar	d designated or quasi-endowment >									
b	Perm	nanent endowment 🕨									
С		porarily restricted endowment >									
		percentages on lines 2a, 2b, and 2c shou									
3а		there endowment funds not in the posses nization by	sion of the organiza	ation tha	t are held	d and admini	stered fo	r the		Yes	No
	_	inrelated organizations							3a(-110
		related organizations							3a(
b	If "Y	es" on 3a(11), are the related organization	ns listed as required	on Sche	dule R?				31	b	
4	Desc	ribe in Part XIII the intended uses of the	organization's end	owment i	unds						
Pa	rt VI			000				000 5		4.0	
	Descr	Complete if the organization answ ription of property (a) Cost or oth (investme	ner basis (b) Co		, Part I\ basis (oth			rm 990, Pai	•	10. I) Book valu	ie
1a	Land										
		ngs									
		hold improvements									
		ment			533,	678		227,119			306,559
	Other					.847		36,347			27,500
		Innes 1a through 1e (Column (d) must e	aual Form 990 Par	t X. colui				→			334,059
	, , , u u	== == == == == (ee.aiiiii (a) iiidat e	-,	,	···· (=// "	···(-) / '		-			227,022

Part VII Investments—Other Securities. Comp See Form 990, Part X, line 12.	plete if the organization	n answei	red "Yes" on Form 99	90, Part IV, line 11b.
(a) Description of security or category (including name of security)		(b) Book Value		od of valuation f-year market value
(1) Financial derivatives (2) Closely-held equity interests (3)Other	: : : : :			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	b			
Part VIII Investments—Program Related. Complete if the organization answered '	'Yes' on Form 990, Part	IV. line	11c. See Form 990.	Part X, line 13.
(a) Description of investment	(b) Book		(c) Metho	od of valuation f-year market value
(1)			Cost of end-o	- Year Market Value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•			
Part IX Other Assets. Complete if the organization (a) [n answered 'Yes' on Form 9 Description	990, Part	IV, line 11d See Form	990, Part X, line 15 (b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25.		on Form	n 990, Part IV, line 1	. ▶ 116 or 11f.
(a) Description of liability (1) Federal income taxes		(b) Boo	k value	
PAYABLES TO COMPONENT ORGANIZATIONS			151,619	
(2)				
(3)		_		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			151.610	
10111 (Section (2) mass square remission (2) miss 25)	▶		151,619	

Schedule D (Form 990) 2017

Page 4

1	Total revenue, gains, and other support per audited financial statements					
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
С	Recoveries of prior year grants		2 c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line $\mathbf{2e}$ from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 4d	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Part			Retur	n.
1	Total expenses and losses per au	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25				
а	Donated services and use of facili	ties	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
С					4c	
5		Ic. (This must equal Form 990, Part I, line 18) .		5	
Pai	t XIII Supplemental Info	ormation				
Pro XI,	vide the descriptions required for Pi lines 2d and 4b, and Part XII, lines	art II, lines 3, 5, and 9, Part III, lines 1a and 4 2d and 4b Also complete this part to provide	4, Part any a	IV, lines 1b and 2b, Part dditional information	V, line	e 4, Part X, line 2, Part
	Return Reference		Exp	planation		
See A	Addıtıonal Data Table					

Page 5		Schedule D (Form 990) 2017						
	ormation (continued)	Part XIII Supplemental Information (continued)						
	Explanation	Return Reference						

Schedule D (Form 990) 2017

Additional Data

Software ID:

EIN: 91-0891029

Name: ASSOCIATION OF WASHINGTON SCHOOL

PRINCIPALS

Supplemental Information

Return Reference

Explanation

THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C) (6) OF THE INTERNAL REVENUE CODE, EXCEPT FOR INCOME, IF ANY, DERIVED FROM CERTAIN ACTIVITI ES THAT ARE UNRELATED TO ITS EXEMPT PURPOSE ADDITIONALLY, THE ASSOCIATION HAS DONE AN ASS ESSMENT OF ANY UNCERTAIN TAX POSITIONS, AS REQUIRED UNDER THE FASB ACCOUNTING GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (ASC 740), AND HAS DETERMINED IT HAS NO UNCERTAIN TAX POSITIONS TO RECORD AS A LIABILITY AT AUGUST 31, 2018 AND 2017 GENERALLY, THE ASSO CIATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U S FEDERAL, STATE OR LOCA

L AUTHORITIES FOR THE FISCAL YEAR ENDED AUGUST 31, 2015, AND PRIOR

efile GRAPHIC print	- DO NOT PROCESS	As Filed Data -					DI	N: 93493193013069		
Schedule I (Form 990) Department of the Treasury	Grants and Other Assistance to Organizations							OMB No 1545-0047 2017 Open to Public Inspection		
Internal Revenue Service Name of the organization ASSOCIATION OF WASHIN PRINCIPALS			, ,				Employer identifi 91-0891029	cation number		
 Does the organization the selection criteria Describe in Part IV the part III Grants and One 	used to award the grants he organization's procedur Other Assistance to Dom	or assistance? res for monitoring the use restic Organizations ar	e of grant funds in the Un nd Domestic Governme	ited States	for the grants or assistanc	•	n 990, Part IV, lın	✓ Yes No		
(a) Name and address organization or government	more than \$5,000 Part II of (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		Description of cash assistance	(h) Purpose of grant or assistance		
(1) WA SCHOOL PRINCIPALS EDUCATION FOUNDATIO 1021 8TH AVENUE SE OLYMPIA, WA 98501		501(C)(3)	148,675					GRANT TO SUPPORT WSPEF'S LEADERSHIP PROGRAM AND ASSISTANCE FOR FACILITIES CONSTRUCTION		
		d in the line 1 table						1 hedule I (Form 990) 2017		

(6)

Explanation

AWSP PAYS EXPENSES DIRECTLY TO VENDORS ON BEHALF OF THE FOUNDATION

Schedule I (Form 990) 2017

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

(7) Part IV

Return Reference

PART I, LINE 2

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19319	3013	069
Sch	edule J	C	ompensati	ion Information	40	1B No	1545-0	0047
(Form 990)		▶ Attach to Form 990.				2017 Open to Public		
•	tment of the Treasury al Revenue Service	P Information a		gov/form990.	is at		ectio	
ASS	me of the organiz OCIATION OF WASH NCIPALS				Employer identificat 91-0891029	ion nu	ımber	
Pa	rt I Questi	ons Regarding Compensa	ation		[
1a				the following to or for a person liste y relevant information regarding the			Yes	No
	Travel for	s or charter travel companions nification and gross-up paymen nary spending account	ts 🗆	Housing allowance or residence for Payments for business use of perso Health or social club dues or initiati Personal services (e g , maid, chau	nal residence on fees			
b		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding payn plete Part III to explain	nent or reimbursement	1b		
2				or allowing expenses incurred by all r, regarding the items checked in line	e 1a?	2	Yes	
3	organization's C	EO/Executive Director Check a	ill that apply Don	d to establish the compensation of to not check any boxes for methods CEO/Executive Director, but explain				
	✓ Compens	ation committee	led	Written employment contract				
		ent compensation consultant	✓	Compensation survey or study				
	☐ Form 990	of other organizations	✓	Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Sec	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cor	ntrol payment?			4a		No
b	Participate in, o	r receive payment from, a supp	lemental nonquali	ified retirement plan?		4b		No
С	•	r receive payment from, an equ of lines 4a-c, list the persons ar		nsation arrangement? olicable amounts for each item in Par	t III	4c		No
5	For persons liste), 501(c)(4), and 501(c)(29 ed on Form 990, Part VII, Section ontingent on the revenues of	on A, line 1a, did t	must complete lines 5-9. the organization pay or accrue any				
а	The organization	n?				5a		
b	Any related org					5b		
6		ed on Form 990, Part VII, Section on tingent on the net earnings o		the organization pay or accrue any				
а	The organization	n?				6 a		
b	Any related org					6b		
	If "Yes," on line	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Secti escribed in lines 5 and 67 If "Ye		the organization provide any nonfixe rt III	d	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in	Regulations section	9		
For F	Paperwork Redu	ction Act Notice, see the In	structions for Fo	orm 990. Cat No 5	50053T Schedule J	(Form	990)	2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (D) Nontaxable (C) Retirement and (E) Total of columns (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 GARY KIPP 130,380 (i) 0 20,624 3.030 154,034 EXECUTIVE DIRECTOR 0 (ii)

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017

efile GRAPH	IC print - DO NOT PROCESS As Filed Data -	DLN: 93493193013069
SCHEDUL (Form 990 or EZ)	99()- Complete to provide information for responses Form 990 or 990-EZ or to provide any addi ▶ Attach to Form 990 or 990- ► Information about Schedule O (Form 990 or 990-	to specific questions on tional information. 1-EZ.
PRINCIPALS	e O, Supplemental Information	Employer identification number 91-0891029
Return Reference	Explanation	1
FORM 990, PART VI, SECTION A, LINE 6	AWSP HAS FOUR MEMBER CLASSES ACTIVE MEMBERSHIP, ASS MERITUS MEMBERSHIP, AND INTERN MEMBERSHIP ACTIVE MEM AND STATE COMPONENT GROUPS AND NATIONAL PRINCIPALS' O PRINCIPAL/ASSISTANT PRINCIPALS CURRENTLY IN ADMINISTRITUTIONAL MEMBERSHIP IS AVAILABLE FOR MEMBERS OF THE ED, WHO ARE NOT ELIGIBLE FOR ACTIVE MEMBERSHIP STATUS VED FOR FORMER ACTIVE MEMBERS WHO HAVE RETIRED FROM AILABLE FOR INDIVIDUALS WHO ARE ACTIVELY SEEKING A PRINETERMINES SERVICES PROVIDED TO THESE CLASSES AND DET TE AND INSTITUTIONAL, EMERITUS, AND INTERN MEMBERS MAY	MBERSHIP INCLUDES MEMBERSHIP IN LOCAL GROUPS ACTIVE MEMBERSHIP IS LIMITED T RATIVE POSITIONS ASSOCIATE AND INST EDUCATION PROFESSION, ACTIVE OR RETIR EMERITUS MEMBERSHIP STATUS IS RESER M PRINCIPALSHIP INTERN MEMBERSHIP IS AV CIPALSHIP AWSP'S EXECUTIVE BOARD D ERMINES THEIR MEMBERSHIP FEES ASSOCIA

Return Reference	Explanation
	ACTIVE MEMBERSHIP IN AWSP CONSISTS OF PRINCIPALS AND ASSISTANT PRINCIPALS FROM ANY OF THRE E AFFILIATED GROUPS (ESPAW FOR ELEMENTARY SCHOOL LEVEL, AWMLP FOR MIDDLE SCHOOL LEVEL, AND WASSP FOR SECONDARY LEVEL) MEMBERS OF THESE AFFILIATED GROUPS AUTOMATICALLY BECOME MEMBE RS OF AWSP AWSP DOES NOT DIRECTLY ELECT BOARD MEMBERS THE AFFILIATED ORGANIZATIONS ELECT THEIR BOARDS FROM WITHIN THEIR MEMBERSHIP SPECIFIC BOARD POSITIONS OF THE AFFILIATED ORGANIZATION BECOME AWSP BOARD MEMBERS THE AWSP PRESIDENT-ELECT IS NOMINATED FROM ONE OF THE AFFILIATED ORGANIZATIONS ON AN ANNUAL ROTATING BASIS THE FULL AWSP BOARD VOTES TO CONFIR M THE NOMINEE AS AWSP PRESIDENT-ELECT

Return Explanation

11010101100	
FORM 990, PART VI.	AWSP BOARD DECISIONS ARE NOT REQUIRED TO BE RATIFIED AWSP MEMBERSHIP WOULD BE ASKED TO VOTE ON BYLAW CHANGES
SECTION A,	
LINE 7B	

Return Explanation
Reference

LINE 11B

FORM 990, THE AWSP BOARD REVIEWS THE DRAFT 990 PRIOR TO FILING
PART VI,
SECTION B.

Return Explanation
Reference

FORM 990, AWSP BOARD MEMBERS ARE ASKED ANNUALLY TO READ AND AFFIRM THAT THEY DO NOT HAVE ANY CONFLIC TS WITH AWSP MATTERS AWSP BOARD MEMBERS SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY SECTION B, LINE 12C

Return Explanation
Reference

FORM 990, AWSP SURVEYS SALARY AND BENEFIT INFORMATION OF SIMILIAR ORGANIZATIONS WITH SIMILIAR RESPON SIBILITIES SALARIES AND BENEFITS INCREASES ARE APPROVED BY THE AWSP BOARD LINE 15

Return Explanation

FORM 990, PART VI, SECTION C, LINE 19

990 Schedule O, Supplemental Information Return Explanation Reference

FORM 990, PART XI, LINE 9

Return Explanation Reference

I FORM 990. THE AUDIT COMMITTEE OVERSIGHT OR SELECTION PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR PART XII,

LINE 2C

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493193013069 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2017 (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** ASSOCIATION OF WASHINGTON SCHOOL PRINCIPALS 91-0891029 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (f) (a)
Name, address, and EIN (if applicable) of disregarded entity (b) Direct controlling Primary activity Legal domicile (state Total income End-of-year assets or foreign country)

				or foreign co	ountry)					enti	ty	
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	ns Comple	te if the organi	zation i	answered "Y	'es" on F	orm 990,	Part IV, lı	ne 34 bec	ause	it had one or i	more	
(a) Name, address, and EIN of related organization		(b) iry activity		(c) lomicile (state eign country)	Exempt Co	d) ode section	Public char (if section 5	ity status	Dii	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled
MANUA COLLOGI, PRINCIPAL C EDUCATION FOUNDATION	DDOWIDEC IV	4.2 EDUCATION		14/4	E01/(C)/(2)		470(D)(4) (A \ / \ / T \			Yes	No
(1)WA SCHOOL PRINCIPALS EDUCATION FOUNDATION 1021 8TH AVENUE SE OLYMPIA, WA 98501 91-1153112	PROVIDES K- SUPPORT FOR PROFESSION			WA	501(C)(3)		170(B)(1) (A		N/A			No
			1		<u> </u>							

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

(a)

Name, address, and ElN of related organization

(b)

Primery activity

Legal domocile (state or foreign country)

(1)

Exempt Code section

(d)

(e)

(h)

Direct controlling entity

(1)

Section 5.12

(3)

Primery activity

(1)

Section 5.12

(3)

Primery activity

(4)

Direct controlling entity

(1)

(1)

Section 5.12

(3)

Primery activity

Primery acti

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		Disprop alloca	tions?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	ral or Piging on	(k) Percenta owners
								Yes	No		Yes	No	
												\perp	
												-	
												_	
Identification of Related Organizates because it had one or more related o						ation answ	vered "Yes	" on Fo	orm 99	90, Part IV,	line :	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	L do (state	(c) egal micile or foreign	Direct	(d) controlling Type entity (C co	(e) e of entity rp, S corp, r trust)	(f) Share of total Income		(g) of end-o year assets	of- Percei owne	ntage	[(13)	(ı) tion 5) cont entity
												. I Y∉	es
		со	untry)										
		со	untry)					<u> </u>					
		со	untry)										
		со	untry)									+	
		со	untry)										
		со	untry)									 - -	
		со	untry)									 - - -	

(1)WA SCHOOL PRINCIPALS EDUCATION FOUNDATION

(2)WA SCHOOL PRINCIPALS EDUCATION FOUNDATION

(3)WA SCHOOL PRINCIPALS EDUCATION FOUNDATION

Schedule R (Form 990) 2017	P	Page 3
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	Yes	s No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b Yes	;
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No

u	Loans on loan guarantees to or for related organization(s)	11	- 1	
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No

f Dividends from related organization(s)		1 f	No
g Sale of assets to related organization(s)		1g	No
h Purchase of assets from related organization(s)	:	Lh	No
i Exchange of assets with related organization(s)		1 i	No
j Lease of facilities, equipment, or other assets to related organization(s)		1j	No
k Lease of facilities, equipment, or other assets from related organization(s)		1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	[11	No
m Performance of services or membership or fundraising solicitations by related organization(s)		1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n Yes	;
o Sharing of paid employees with related organization(s)		lo Yes	;
p Reimbursement paid to related organization(s) for expenses		lp	No
q Reimbursement paid by related organization(s) for expenses		1q	No
r Other transfer of cash or property to related organization(s)		1r	No

(b) Transaction

type (a-s)

В

Ν

0

(c) Amount involved

148,675

21,800

148,675

FMV

FMV

FMV

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

(a) Name of related organization

No

(d) Method of determining amount involved

Schedule R (Form 990) 2017

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner	g l	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017