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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

Open to Public Inspection

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019

B Check if applicable:

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

CREDIT UNIONS IN THE STATE OF WASHINGTON

BOEING EMPLOYEES CREDIT UNION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

12770 GATEWAY DR S MAILSTOP 1011-1

Room/suite

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

TUKWILA, WA 98168

F Name and address of principal officer:

BENSON PORTER

12770 GATEWAY DR S MAILSTOP 1011-1

TUKWILA, WA 98168

H(a) Is this a group return for subordinates?

☐ Yes

☒ No

H(b) Are all subordinates included?

☐ Yes

☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status:

☐ 501(c)(3)

☒ 501(c) (14) ◀ (insert no.)

☐ 4947(a)(1) or

☐ 527

J Website: ▶

WWW.BECU.ORG

K Form of organization:

☒ Corporation

☐ Trust

☐ Association

☐ Other ▶

L Year of formation: 1935

M State of legal domicile:

WA

Part I

Summary

1 Briefly describe the organization's mission or most significant activities:

AS A COOPERATIVE, WE BRING PEOPLE TOGETHER TO IMPROVE THE FINANCIAL WELL-BEING OF OUR MEMBERS AND THEIR COMMUNITIES.

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

3

Number of voting members of the governing body (Part VI, line 1a)

10

4

Number of independent voting members of the governing body (Part VI, line 1b)

10

5

Total number of individuals employed in calendar year 2019 (Part V, line 2a)

2,712

6

Total number of volunteers (estimate if necessary)

0

7a

Total unrelated business revenue from Part VIII, column (C), line 12

1,350,412

7b

Net unrelated business taxable income from Form 990-T, line 39

509,086

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Prior Year

0

732,004,564

125,708,654

3,425,020

861,138,238

Current Year

0

809,197,752

203,646,758

2,035,773

1,014,880,283

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

4,592,355

0

228,854,065

0

374,499,542

607,945,962

253,192,276

5,299,128

0

267,215,125

0

467,005,396

739,519,649

275,360,634

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Beginning of Current Year

19,588,565,098

17,478,637,179

2,109,927,919

End of Year

22,178,675,264

19,725,180,411

2,453,494,853

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

2020-11-03

Date

MELBA BARTELS EVP FINANCE/CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date 2020-11-03

Check ☐ if self-employed

PTIN P00448102

Firm's name ▶ MOSS ADAMS LLP

Firm's EIN ▶ 91-0189318

Firm's address ▶ 601 W RIVERSIDE AVENUE STE 1800

Phone no. (509) 747-2600

SPOKANE, WA 99201

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2019)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

AS A COOPERATIVE, WE BRING PEOPLE TOGETHER TO IMPROVE THE FINANCIAL WELL-BEING OF OUR MEMBERS AND THEIR COMMUNITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

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

4e Total program service expenses ►

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	Yes
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 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 services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	Yes
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
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 in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	Yes
f 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 	11f	Yes
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	Yes
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 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 	21	Yes

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23	Did the organization answer "Yes" to Part VII, Section A, 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," complete Schedule J	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

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

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Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.	1a	10
b	Enter the number of voting members included in line 1a, above, who are independent	1b	10
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	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	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	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	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?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes
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?	16b	No

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 ▶TINA WALLACE 12770 GATEWAY DR S TUKWILA, WA 98168 (206) 439-5700

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 ☐

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

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

See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

[illegible]

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								13,957,946	0	2,749,667

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 587

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PSCU FINANCIAL SERVICES 560 CARILLON PKWY ST PETERSBURG, FL 33716	ONLINE BANKING	15,732,373
FISERV CNS 5325 S MOORLAND RD NEW BERLIN, WI 53151	FINANCIAL SERVICES	13,089,661
MASTERCARD INTERNATIONAL 2000 PURCHASE STREET PURCHASE, NY 10577	FINANCIAL SERVICES	12,202,226
DNA BRAND MECHANICS 1301 FIFTH AVE SUITE 2600 SEATTLE, WA 98101	BRANDING & ADVERTISING	10,382,634
MICROSOFT CORPORATION INC ONE MICROSOFT WAY REDMOND, WA 98052	SOFTWARE & CLOUD SERVICES	8,995,420

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 283

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Part VIII Statement of Revenue																	
Check if Schedule O contains a response or note to any line in this Part VIII												<input type="checkbox"/>					
										(A) Total revenue		(B) Related or exempt function revenue		(C) Unrelated business revenue		(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns			1a													
	b Membership dues			1b													
	c Fundraising events			1c													
	d Related organizations			1d													
	e Government grants (contributions)			1e													
	f All other contributions, gifts, grants, and similar amounts not included above			1f													
	g Noncash contributions included in lines 1a - 1f:\$			1g													
	h Total. Add lines 1a-1f																
Program Service Revenue				Business Code													
	2a LOAN INTEREST INCOME			522291		621,620,936		621,620,936									
	b FEE INCOME			522100		155,661,888		154,658,558		1,003,330							
	c BROKER INCOME			523000		10,392,524		10,392,524									
	d CONTRACT INCENTIVE INCOME			525990		10,198,759		10,198,759									
	e OTHER PROGRAM REVENUE			522100		6,545,030		6,479,410		65,620							
	f All other program service revenue.					4,778,615		4,722,694		55,921							
	g Total. Add lines 2a-2f.					809,197,752											
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)					174,594,743						174,594,743					
	4 Income from investment of tax-exempt bond proceeds																
	5 Royalties																
				(i) Real		(ii) Personal											
	6a Gross rents			6a		4,564,828											
	b Less: rental expenses			6b		2,754,596											
	c Rental income or (loss)			6c		1,810,232											
	d Net rental income or (loss)					1,810,232						1,810,232					
				(i) Securities		(ii) Other											
	7a Gross amount from sales of assets other than inventory			7a		143,761,388		39,033,370									
	b Less: cost or other basis and sales expenses			7b		113,948,008		39,794,735									
	c Gain or (loss)			7c		29,813,380		-761,365									
	d Net gain or (loss)					29,052,015						29,052,015					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18			8a													
	b Less: direct expenses			8b													
	c Net income or (loss) from fundraising events																
	9a Gross income from gaming activities. See Part IV, line 19			9a													
	b Less: direct expenses			9b													
	c Net income or (loss) from gaming activities																
	10aGross sales of inventory, less returns and allowances			10a													
b Less: cost of goods sold			10b														
c Net income or (loss) from sales of inventory																	
Miscellaneous Revenue			Business Code														
11aCUSO INVESTMENTS			525990		225,541				225,541								
b																	
c																	
d All other revenue																	
e Total. Add lines 11a-11d					225,541												
12 Total revenue. See instructions					1,014,880,283		808,072,881		1,350,412		205,456,990						

Form 990 (2019)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,299,128			
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, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	13,227,793			
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	189,828,765			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	19,918,973			
9 Other employee benefits	27,950,054			
10 Payroll taxes	16,289,540			
11 Fees for services (non-employees):				
a Management				
b Legal	2,702,253			
c Accounting	1,406,779			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	654,857			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	25,084,115			
12 Advertising and promotion	27,287,533			
13 Office expenses	17,906,249			
14 Information technology	40,655,058			
15 Royalties				
16 Occupancy	19,168,902			
17 Travel	1,873,297			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,677,126			
20 Interest	143,507,127			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	22,732,674			
23 Insurance	1,165,936			
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 PRODUCT COST & SERVICIN	104,789,307			
b UBI TAX EXPENSE	293,982			
c PROVISION FOR LOAN LOSS	55,776,530			
d DUES & SUBSCRIPTIONS	649,661			
e All other expenses	-325,990			
25 Total functional expenses. Add lines 1 through 24e	739,519,649			
26 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		324,344,799	1	222,702,051
	2	Savings and temporary cash investments		690,649,211	2	975,186,902
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		274,794	4	248,871
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net		12,858,497,050	7	14,187,247,010
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		30,437,604	9	23,796,927
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	306,206,312		
	b	Less: accumulated depreciation	10b	139,494,968		
				166,765,979	10c	166,711,344
	11	Investments—publicly traded securities		62,554,847	11	63,912,547
	12	Investments—other securities. See Part IV, line 11		4,690,617,330	12	5,770,005,536
	13	Investments—program-related. See Part IV, line 11		14,659,058	13	15,256,849
	14	Intangible assets			14	
15	Other assets. See Part IV, line 11		749,764,426	15	753,607,227	
16	Total assets. Add lines 1 through 15 (must equal line 34)		19,588,565,098	16	22,178,675,264	
Liabilities	17	Accounts payable and accrued expenses		107,632,634	17	131,348,480
	18	Grants payable			18	
	19	Deferred revenue		3,680,538	19	1,963,112
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties		782,809,962	23	1,583,997,722
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		16,584,514,045	25	18,007,871,097
	26	Total liabilities. Add lines 17 through 25		17,478,637,179	26	19,725,180,411
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions			27	
	28	Net assets with donor restrictions			28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds		0	29	0
	30	Paid-in or capital surplus, or land, building or equipment fund		0	30	0
	31	Retained earnings, endowment, accumulated income, or other funds		2,109,927,919	31	2,453,494,853
	32	Total net assets or fund balances		2,109,927,919	32	2,453,494,853
33	Total liabilities and net assets/fund balances		19,588,565,098	33	22,178,675,264	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,014,880,283
2	Total expenses (must equal Part IX, column (A), line 25)	2	739,519,649
3	Revenue less expenses. Subtract line 2 from line 1	3	275,360,634
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,109,927,919
5	Net unrealized gains (losses) on investments	5	99,104,346
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-30,898,046
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,453,494,853

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

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

Additional Data

Software ID:

Software Version:

EIN: 91-0219435

Name: CREDIT UNIONS IN THE STATE OF WASHINGTON
BOEING EMPLOYEES CREDIT UNION

Form 990 (2019)

Form 990, Part III, Line 4a:

TOTAL 1,237,456 MEMBERS; 132,988 NEW MEMBERS FOR 2019; 164,558 LOANS ORIGINATED TOTALING \$9,313,043,000.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SUSAN EHRLICH DIRECTOR/CHAIRPERSON	6.00	X		X				73,968	0	0
DEBRA SOMBERG DIRECTOR	6.00	X						67,303	0	0
DESIREE SERR DIRECTOR	6.00	X						64,870	0	0
BILL LONGBRAKE DIRECTOR	6.00	X						63,343	0	0
DAVID YONCE DIRECTOR	6.00	X						62,719	0	0
WILL DAUGHERTY DIRECTOR	6.00	X						60,494	0	0
JOHN MCMURRAY DIRECTOR, AUDIT COMMITTEE	6.00	X						55,219	0	0
JESSIE WOOLLEY-WILSON DIRECTOR	6.00	X						58,553	0	0
DENIS FARMER DIRECTOR, AUDIT COMMITTEE	6.00	X						58,343	0	0
MATT OPPENHEIMER DIRECTOR	6.00	X						56,953	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN BENSON PORTER PRESIDENT/CEO	40.00			X				1,492,032	0	416,069
THOMAS MORGAN EVP CHIEF INFORMATION OFFICER	40.00			X				862,796	0	84,177
MELANIE WALSH EVP CHIEF ADMINISTRATIVE OFFICER	40.00			X				831,629	0	66,008
MICHAEL SCOTT STRAND EVP CHIEF OPERATING OFFICER	40.00			X				728,815	0	260,373
MELBA BARTELS EVP FINANCE/CFO	40.00			X				712,857	0	192,512
DOUGLAS MARSHALL EVP CHIEF DIGITAL & PRODUCT OFFICER	40.00			X				705,045	0	95,106
JOHN STEWART EVP CHIEF RISK OFFICER	40.00			X				575,709	0	123,048
THOMAS BERQUIST EVP CHIEF MARKETING OFFICER	40.00			X				550,489	0	90,879
DANA GRAY SVP COMMERICAL & BUSINESS SERVICES	40.00			X				414,157	0	88,680
TRAVIS SIMPSON SVP RETAIL, CONTACT CENTER AND WEALTH	40.00			X				407,392	0	73,756

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GENNADIY HENRY DARAKHOVSKIY SVP TREASURY CIO	40.00			X				407,276	0	80,060
MICHAEL RYAN SVP GENERAL COUNSEL	40.00			X				398,010	0	48,171
LISA GROVE SVP CHIEF AUDIT EXECUTIVE	40.00			X				365,138	0	80,539
SEAN MURPHY SVP CHIEF INFORMATION SECURITY OFFICER	40.00			X				325,925	0	11,493
GREGG KATS SVP ADMINISTRATION & SERVICING	40.00			X				322,421	0	125,992
MICHAEL ZELL SVP DIGITAL	40.00			X				315,631	0	80,969
LORRAINE STEWART SVP MORTGAGE LENDING	40.00			X				314,749	0	76,780
AARON BRESKO SVP CONSUMER LENDING	40.00			X				309,362	0	141,364
KEN MYHRA SVP CREDIT CARD	40.00			X				271,228	0	105,978
JENNIFER FANCHER SVP ENTERPRISE STRATEGIC SERVICES	40.00			X				270,444	0	70,315

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SARA MOOREHEAD SVP COOPERATIVE AFFAIRS	40.00			X				242,090	0	12,826
SHAHZAD KAZI SVP CREDIT RISK MANAGEMENT & CCO	40.00			X				204,383	0	17,607
ANTHONY HARRIS ASSISTANT CORPORATE SECRETARY	40.00			X				196,088	0	70,374
SOLYNN MCCURDY SVP SOCIAL IMPACT & BECU FOUNDATION EXECUTIVE DIRE	40.00			X				166,984	0	11,123
LINNEA WEXLER SR COMMERICAL RELATIONSHIP MANAGER II	40.00					X		528,974	0	60,122
MARK THOMSON VP COMPLIANCE & PRIVACY	40.00					X		364,429	0	95,456
MARC WRIGHT VP BUSINESS CREDIT ADMINISTRATION	40.00					X		353,687	0	76,594
MATHEW DAILEY VP INVESTMENT SERVICES	40.00					X		351,338	0	86,113
KYLE WELSH VP INFORMATION SECURITY	40.00					X		347,103	0	7,183

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

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 CREDIT UNIONS IN THE STATE OF WASHINGTON BOEING EMPLOYEES CREDIT UNION	Employer identification number 91-0219435
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")	
2	Political campaign activity expenditures (see instructions)	\$ 35,308
3	Volunteer hours for political campaign activities (see instructions)	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$	
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$	
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
b	If "Yes," describe in Part IV.		

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$	
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	\$	35,308
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.	\$	35,308
4	Did the filing organization file Form 1120-POL for this year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.		

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1 See Additional Data Table				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
Not over \$500,000	20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000	\$1,000,000.	
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	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)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) 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).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART I-A, LINE 1:	IN 2019, BECU CONTRIBUTED PRIMARILY TO THE ELECTION CAMPAIGNS OF VARIOUS INDIVIDUALS RUNNING FOR WASHINGTON STATE ELECTED POSITIONS.

Additional Data

Software ID:
Software Version:
EIN: 91-0219435
Name: CREDIT UNIONS IN THE STATE OF WASHINGTON
BOEING EMPLOYEES CREDIT UNION

Form 990, Schedule C, Part 1-C, Line 5

(a)Name	(b)Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
CITIZENS TO ELECT KATHY HOUGARDY	14950 57TH AVENUE S TUKWILA, WA 98168	205627651	250	
CITIZENS VOTING FOR EKBERG	4920 S 161ST STREET TUKWILA, WA 98188	800421457	500	
DEMOCRATIC GOVERNORS ASSOCIATION	1225 EYE STREET NW SUITE 1100 WASHINGTON, DC 20005	521304889	15000	
ELECT KATE4 TUKWILA COMMITTEE	PO BOX 69534 TUKWILA, WA 98168	452564150	250	
FRIENDS OF LARRY SPRINGER	700 20TH AVE W KIRKLAND, WA 98033	830382872	1000	
FRIENDS OF LAURIE JINKINS	PO BOX 2032 TACOMA, WA 98401	272214467	2000	
HOUSE DEMOCRATIC CAMPAIGN COMMITTEE	4130 1ST AVENUE SOUTH STE D SEATTLE, WA 98134	916178946	2000	
HOUSE REPUBLICAN ORGANIZATIONAL COMMITTEE	PO BOX 7222 OLYMPIA, WA 98507	916177625	1000	
JAY INSLEE FOR WASHINGTON	PO BOX 21067 SEATTLE, WA 98111	452533952	2000	
MARK MULLET FOR STATE SENATE	2525 NE PARK DRIVE A ISSAQUAH, WA 98029	454091046	2000	
NORTHWEST CREDIT UNION ASSOCIATION	18000 INTERNATIONAL BLVD SEATAC, WA 98188	910460483	308	
SENATE REPUBLICAN CAMPAIGN COMMITTEE	PO BOX 11025 OLYMPIA, WA 98508	910987396	1000	
THE HARRY TRUMAN FUND	PO BOX 9100 SEATTLE, WA 98109	911769570	1000	
THE KENNEDY FUND	119 - 1ST AVE S STE 320 SEATTLE, WA 98104	482745811	2000	
THE LEADERSHIP COUNCIL	PO BOX 12085 OLYMPIA, WA 98508	911714860	2000	
THE REAGUN FUND	PO BOX 904 OLYMPIA, WA 98507	911716818	2000	
WASHINGTON SENATE DEMOCRATIC CAMPAIGN	4130 1ST AVE SOUTH STE D SEATTLE, WA 98134	462614068	1000	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
CREDIT UNIONS IN THE STATE OF WASHINGTON
BOEING EMPLOYEES CREDIT UNION

Employer identification number
91-0219435

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 52283D

Schedule D (Form 990) 2019

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table:

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a

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

(i) unrelated organizations

(ii) related organizations

b

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

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	22,794,549		22,794,549
b	Buildings	108,843,333	34,616,693	74,226,640
c	Leasehold improvements	41,308,228	28,447,903	12,860,325
d	Equipment	63,389,251	33,198,090	30,191,161
e	Other	69,870,951	43,232,282	26,638,669
Total.	Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶			166,711,344

Part VII

Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	-7,418,824	F
(2) Closely-held equity interests		
(3) Other _____		
(A) INVESTMENT IN STOCK	73,360,100	F
(B) HELD TO MATURITY & AVAILABLE FOR SALE INVESTMENTS	5,704,064,260	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	5,770,005,536	

Part VIII

Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(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 answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) ▶	

Part X

Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	18,007,871,097

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Schedule D (Form 990) 2019

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	1,043,059,677
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	32,672,087
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	4,925,124
e	Add lines 2a through 2d	2e	37,597,211
3	Subtract line 2e from line 1	3	1,005,462,466
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	9,417,817
c	Add lines 4a and 4b	4c	9,417,817
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	1,014,880,283

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	735,252,497
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	4,925,124
e	Add lines 2a through 2d	2e	4,925,124
3	Subtract line 2e from line 1	3	730,327,373
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	9,192,276
c	Add lines 4a and 4b	4c	9,192,276
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	739,519,649

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 91-0219435
Name: CREDIT UNIONS IN THE STATE OF WASHINGTON
BOEING EMPLOYEES CREDIT UNION

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE CREDIT UNION IS EXEMPT BY STATUTE FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501 OF THE INTERNAL REVENUE CODE OF 1954; HOWEVER, THE CREDIT UNION'S UNRELATED BUSINESS INCOME IS SUBJECT TO FEDERAL INCOME TAXES. THERE WERE NO SIGNIFICANT INCOME TAXES FOR THE YEARS ENDED DECEMBER 31, 2019 OR 2018. ACCOUNTING PRINCIPLES PRESCRIBE A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE CREDIT UNION HAD NO UNRECOGNIZED TAX POSITIONS AT DECEMBER 31, 2019 OR 2018. IT IS THE CREDIT UNION'S POLICY TO RECORD ANY PENALTIES OR INTEREST ARISING FROM FEDERAL OR STATE TAXES AS A COMPONENT OF NONINTEREST EXPENSE. THE CREDIT UNION FILES EXEMPT ORGANIZATION AND UNRELATED BUSINESS INCOME TAX RETURNS WITH THE FEDERAL JURISDICTION.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES 2,754,596. IMPAIRED ASSETS 2,170,528.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	CUSO INVESTMENT INCOME 225,541. INTEREST EXPENSE 9,192,276.

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES 2,754,596. IMPAIRED ASSETS 2,170,528.

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	INTEREST EXPENSE 9,192,276.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
CREDIT UNIONS IN THE STATE OF WASHINGTON
BOEING EMPLOYEES CREDIT UNION

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number
91-0219435

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 94

3 Enter total number of other organizations listed in the line 1 table ▶ 0

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	BECU MONITORS THE USE OF GRANT FUNDS IN THE U.S. BY ASKING EACH OF OUR NON-PROFIT GRANT OR DONATION RECIPIENTS TO PROVIDE PERIODIC UPDATES AND RANDOMLY CONDUCT ON SITE VISITS OF GRANT RECIPIENTS. BECU GIFT MATCHING GUIDELINES REQUIRE THE DONEE ORGANIZATION TO PROVIDE PROOF OF RECEIPT OF FUNDS AND THEIR FEDERAL TAX IDENTIFICATION NUMBER.

Additional Data

Software ID:
Software Version:
EIN: 91-0219435
Name: CREDIT UNIONS IN THE STATE OF WASHINGTON
BOEING EMPLOYEES CREDIT UNION

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BECU FOUNDATION 12770 GATEWAY DRIVE S TUKWILA, WA 98168	91-1703337	501(C)(3)	302,671	56,833	FMV	SHARED ADMINISTRATIVE SERVICES	PROVIDE ADMINISTRATIVE OPERATIONS FOR THE BECU FOUNDATION
ADVOCATES FOR IMMIGRANTS IN DETENTION NW 1915 S SHERIDAN AVENUE TACOMA, WA 98405	27-1031009	501(C)(3)	44,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFTER-SCHOOL ALL-STAR 5900 WILSHIRE BLVD STE 2000 LOS ANGELES, CA 90036	95-4441208	501(C)(3)	19,400				DONATION
ALLIANCE FOR EDUCATION 500 UNION STREET SUITE 320 SEATTLE, WA 981012332	91-1508191	501(C)(3)	8,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ONLINE GIVING FOUNDATION INC 200 MAIN STREET SAFETY HARBOR, FL 34695	81-0739440	501(C)(3)	440,000				EMPLOYEE MATCHING DONATIONS
AMERICAN RED CROSS 431 18TH STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	10,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARLINGTON KIDS KLOSET 135 SOUTH FRENCH BOX C ARLINGTON, WA 98223	54-2161032	501(C)(3)	17,500				DONATION
ASIAN AMERICAN-PACIFIC ISLANDERS IN PHILANTHROPY 300 FRANK H OGAWA PLAZA OAKLAND, CA 94612	94-3150064	501(C)(3)	5,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF WASHINGTON BUSINESS 1414 CHERRY STREET SE OLYMPIA, WA 98501	91-0496803	501(C)(3)	5,500				DONATION
ATHLETES FOR KIDS 3020 ISSAQUAH-PINE LAKE RD 254 SAMMAMISH, WA 98075	81-0552451	501(C)(3)	19,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLEVUE COLLEGE FOUNDATION 3000 LANDERHOLM CIRCLE SE BELLEVUE, WA 98007	91-1051671	501(C)(3)	15,000				DONATION
BEYOND PINK SPOKANE 4119 S CUBA STREET SPOKANE, WA 99223	80-0638255	501(C)(3)	17,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIDGE DISABILITY MINISTRIES 12356 NORTHUP WAY STE 103 BELLEVUE, WA 98005	91-1383241	501(C)(3)	19,400				DONATION
BRIGADOON SERVICE DOGS INC 4759 MISSION ROAD BELLINGHAM, WA 98226	27-0100385	501(C)(3)	20,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUSINESS IMPACT NW 1437 S JACKSON SEATTLE, WA 98144	91-1764008	501(C)(3)	152,500				DONATION
CAMP JOURNEY AT ROSS POINT 820 S ROSS POINT ROAD POST FALLS, ID 83854	82-0237661	501(C)(3)	19,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPITOL HILL HOUSING FOUNDATION 1620 12TH AVE STE 205 SEATTLE, WA 98122	27-1682190	501(C)(3)	17,500				DONATION
CAREER PATH SERVICES 10 N POST STREET SPOKANE, WA 99201	91-1032846	501(C)(3)	20,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARES OF WASHINGTON 1833 N 105TH STREET STE 201 SEATTLE, WA 98133	13-4237286	501(C)(3)	17,500				DONATION
CAROLINA YOUTH DEVELOPMENT CENTER 5055 LACKAWANNA BLVD NORTH CHARLESTON, SC 29405	57-0669877	501(C)(3)	19,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRIST KITCHEN PO BOX 10307 SPOKANE, WA 99209	47-3161138	501(C)(3)	10,000				DONATION
COLLEGE ACCESS NOW 3211 MLK WAY S SUITE A SEATTLE, WA 98144	68-0624494	501(C)(3)	42,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE SUCCESS FOUNDATION 15500 SE 30TH PLACE SUITE 200 BELLEVUE, WA 98007	91-2036088	501(C)(3)	70,000				DONATION
COMMUNITY COLLEGES OF SPOKANE FOUNDATION 501 N RIVERPOINT BLVD MS 1005 SPOKANE, WA 992176000	91-0886962	501(C)(3)	10,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COURTHOUSE DOGS FOUNDATION 317 109TH AVE SE BELLEVUE, WA 98004	46-0577127	501(C)(3)	15,250				DONATION
CWU FOUNDATION 400 E UNIVERSITY WAY ELLENSBURG, WA 98926	23-7017467	501(C)(3)	10,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DRESS FOR SUCCESS SEATTLE 1118 5TH AVENUE SEATTLE, WA 98101	91-1925352	501(C)(3)	19,400				DONATION
EASTERN WASHINGTON UNIVERSITY FOUNDATION 102 HARGREAVES HALL CHENEY, WA 99004	91-1019819	501(C)(3)	10,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EXPRESS CREDIT UNION 1930 6TH AVENUE S STE 104 SEATTLE, WA 981341627	91-0573334	501(C)(3)	579,869				DONATION
FINANCIAL BEGINNINGS WASHINGTON 12783 GATEWAY DRIVE S TUKWILA, WA 98168	81-4631680	501(C)(3)	35,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST UNITED METHODIST CHURCH OF SEATTLE 180 DENNY WAY SEATTLE, WA 98109	91-0564750	501(C)(3)	15,000				DONATION
FIRST WASHINGTON 21238 68TH AVE S KENT, WA 98032	45-2443839	501(C)(3)	17,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FORTERRA NW 901 FIFTH AVENUE STE 2200 SEATTLE, WA 98164	94-3112461	501(C)(3)	30,000				DONATION
FREEDOM EDUCATION PROJECT PUGET SOUND 918 S HORTON STREET STE 912 SEATTLE, WA 98134	45-5291038	501(C)(3)	34,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEDOM PROJECT PO BOX 31191 SEATTLE, WA 98103	91-2129474	501(C)(3)	34,400				DONATION
GIVING BACK PACKS SPOKANE 5428 S REGAL ST UNIT 30321 SPOKANE, WA 99223	83-2160752	501(C)(3)	19,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TO LOCAL 2800 S 192ND STREET STE 104 SEA TAC, WA 98188	27-3133200	501(C)(3)	50,000				DONATION
HABITAT FOR HUMANITY SEATTLE-KING COUNTY 560 NACHES AVE SW 110 RENTON, WA 98057	91-1342397	501(C)(3)	82,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARBOR WILD WATCH 3110 JUDSON STREET 99 GIG HARBOR, WA 98335	20-4205938	501(C)(3)	34,400				DONATION
HIGHLINE HIGH SCHOOL ALUMNI FOUNDATION PO BOX 66647 BURIEN, WA 98166	91-1667582	501(C)(3)	6,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGHLINE SCHOOL DISTRICT #401 15675 AMBAUM BLVD SW BURIEN, WA 98166	91-6001631	501(C)(3)	18,000				DONATION
HOPEWORKS SOCIAL ENTERPRISES 3331 BROADWAY EVERETT, WA 98201	80-0684608	501(C)(3)	6,631				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOUSING DEVEPLOMENT CONSORTIUM 1326 FIFTH AVE SUITE 230 SEATTLE, WI 98101	94-3073588	501(C)(3)	10,000				DONATION
HOUSING HOPE 5830 EVERGREEN WAY EVERETT, WA 982033748	94-3060709	501(C)(3)	202,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INNOVENTURES 2100 24TH AVE S 380 SEATTLE, WA 98144	91-1704028	501(C)(3)	7,500				DONATION
JUNIOR ACHIEVEMENT OF OR AND SW WA INC 7830 SE FOSTER ROAD PORTLAND, OR 97206	93-0384007	501(C)(3)	55,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUNIOR ACHIEVEMENT OF WASHINGTON 1700 WESTLAKE AVE N STE 100 SEATTLE, WA 98109	91-0604913	501(C)(3)	215,000				DONATION
KITSAP COMMUNITY RESOURCES PO BOX 647 BREMERTON, WA 98337	27-0313905	501(C)(3)	7,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARY'S PLACE FOR THE ARTS 2321 HOYT AVENUE EVERETT, WA 98201	45-3411935	501(C)(3)	19,400				DONATION
MENDED HEARTS OF SPOKANE 932 W 32ND AVENUE SPOKANE, WA 99203	46-4753814	501(C)(3)	19,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINI MART CITY PARK 851 DONOVAN STREET SEATTLE, WA 98108	46-2201493	501(C)(3)	17,500				DONATION
MUSEUM OF FLIGHT 9404 E MARGINAL WAY S SEATTLE, WA 98108	91-0785826	501(C)(3)	10,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL CREDIT UNION FOUNDATION INC 5710 MINERAL POINT ROAD MADISON, WI 53705	39-1383650	501(C)(3)	200,000				DONATION
NORTHEAST YOUTH CENTER 3004 E QUEEN AVENUE SPOKANE, WA 99217	71-0886315	501(C)(3)	19,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST CREDIT UNION FOUNDATION 18000 INTERNATIONAL BLVD STE 350 SEATAC, WA 98188	91-1649328	501(C)(3)	155,500				DONATION
NORTHWEST HARVEST PO BOX 12272 SEATTLE, WA 98102	91-0826037	501(C)(3)	17,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST INNOVATION RESOURCE CTR 2200 RIMLAND DR STE 210 BELLINGHAM, WA 982266643	27-3156063	501(C)(3)	25,000				DONATION
OPEN DOORS FOR MULTICULTURAL FAMILIES 24437 RUSSELL RD 220 KENT, WA 98032	27-1206272	501(C)(3)	17,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUTREACH & RESOURCE SERVICES FOR WOMEN 100002 AURORA AVE N SEATTLE, WA 98133	45-5619578	501(C)(3)	6,000				DONATION
PARENT TRUST FOR WASHINGTON CHILDREN 2200 RAINIER AVE S SEATTLE, WA 98144	91-1036940	501(C)(3)	19,400				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHILANTHROPY NORTHWEST 2101 4TH AVENUE SUITE 650 SEATTLE, WA 98121	91-1110995	501(C)(3)	25,000				DONATION
PIKE MARKET SENIOR CENTER & FOOD BANK 85 PIKE STREET SUITE 200 SEATTLE, WA 98101	91-1034838	501(C)(3)	15,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLYMOUTH HOUSING GROUP 2113 THIRD AVENUE SEATTLE, WA 98121	91-1122621	501(C)(3)	6,000				DONATION
RAIN CITY ROCK CAMP FOR GIRLS 117 E LOUISA ST 445 SEATTLE, WA 98102	94-3455872	501(C)(3)	37,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAISING GIRLS PO BOX 7851 TACOMA, WA 98417	82-1306270	501(C)(3)	54,400				DONATION
READING PARTNERS 180 GRAND AVENUE STE 800 OAKLAND, CA 94612	77-0568469	501(C)(3)	17,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REBOOT THEATRE COMPANY 8112 5TH AVE NE SEATTLE, WA 98115	81-4279851	501(C)(3)	19,400				DONATION
REBUILDING TOGETHER SOUTH SOUND 4019 S ORCHARD STREET TACOMA, WA 98404	91-2147601	501(C)(3)	25,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCORE GREATER SEATTLE 1175 HERNDON PARKWAY NO 900 HERNDON, VA 20170	52-1067290	501(C)(3)	6,000				DONATION
SEATTLE COLLEGES FOUNDATION 1500 HARVARD AVENUE SEATTLE, WA 981223803	83-0551671	501(C)(3)	175,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE FOUNDATION 1601 FIFTH AVE STE 1900 SEATTLE, WA 98101	91-6013536	501(C)(3)	50,000				DONATION
SEATTLE GOOD BUSINESS NETWORK 220 - 2ND AVE S STE 202 SEATTLE, WA 98104	27-2172486	501(C)(3)	41,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE REPERTORY THEATRE PO BOX 900923 SEATTLE, WA 98109	91-0756535	501(C)(3)	17,500				DONATION
SNOQUALMIE VALLEY COMMUNITY NETWORK PO BOX 910 CARNATION, WA 98014	46-4274413	501(C)(3)	17,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIAL VENTURE PARTNERS 220 SECOND AVE S 3RD FL SEATTLE, WA 98104	91-1894424	501(C)(3)	22,500				DONATION
SOUTH SEATTLE COLLEGE FOUNDATION 2101 4TH AVENUE STE 2050 SEATTLE, WA 98121	91-1122981	501(C)(3)	12,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SPOKANE NEIGHBORHOOD ACTION PARTNERS 3102 W FORT GEORGE WRIGHT DR SPOKANE, WA 992245203	91-1311127	501(C)(3)	98,707				DONATION
TACOMA SCHOOL DISTRICT NO 10 601 S 8TH STREET TACOMA, WA 984011357	91-6001553	501(C)(3)	6,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BEYOND PROJECT 4508 FERNCROFT RD MERCER ISLAND, WA 98040	47-4049333	501(C)(3)	19,400				DONATION
THE DANCE SCHOOL PO BOX 1833 EVERETT, WA 98206	20-5010653	501(C)(3)	17,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE EVERGREEN STATE COLLEGE FOUNDATION 2700 EVERGREEN PARKWAY NW L3900 OLYMPIA, WA 98505	91-0981488	501(C)(3)	10,000				DONATION
THE GOOD FOOT ARTS COLLECTIVE 4913 S PILGRIM STREET SEATTLE, WI 98118	91-1541988	501(C)(3)	17,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF SKAGIT COUNTY PO BOX 451 BURLINGTON, WA 98233	91-0755705	501(C)(3)	15,000				DONATION
UNITED WAY OF SNOHOMISH COUNTY 3120 MCDOUGALL AVE SUITE 200 EVERETT, WA 98201	91-0606507	501(C)(3)	100,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON PO BOX 3981 SEATTLE, WA 98124	91-6001537	501(C)(3)	166,250				DONATION
UNIVERSITY OF WASHINGTON ALUMNI ASSOC 4333 BROOKLYN AVENUE NE SEATTLE, WA 98195	91-0450697	501(C)(3)	285,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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VICTIM SUPPORT SERVICES PO BOX 1949 EVERETT, WA 982061949	91-0993005	501(C)(3)	17,500				DONATION
VIVA FARMS PO BOX 1714 MOUNT VERNON, WA 98273	20-4396437	501(C)(3)	32,500				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON BUSINESS WEEK PO BOX 1170 RENTON, WA 98051	91-1048245	501(C)(3)	10,000				DONATION
WASHINGTON DECA 200 WEST MERCER ST STE 207 SEATTLE, WA 98119	91-1308496	501(C)(3)	16,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON WOMEN IN NEED 232 5TH AVE S SUITE 201 KIRKLAND, WA 98033	91-1559848	501(C)(3)	20,000				DONATION
WHITE CENTER FOOD BANK 10829 8TH AVE SW SEATTLE, WA 98146	91-1167830	501(C)(3)	15,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLDWIDE FOUNDATION FOR CREDIT UNIONS 5710 MINERAL POINT ROAD MADISON, WI 53705	39-6093210	501(C)(3)	15,000				DONATION
WSU FOUNDATION PO BOX 641927 PULLMAN, WA 99164	91-1075542	501(C)(3)	333,000				DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH CARE 2500 NE 54TH STREET SEATTLE, WA 98105	91-0917079	501(C)(3)	20,000				DONATION

Schedule J (Form 990)	Compensation Information	OMB No. 1545-0047
		2019
Department of the Treasury Internal Revenue Service	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	
Name of the organization CREDIT UNIONS IN THE STATE OF WASHINGTON BOEING EMPLOYEES CREDIT UNION		Employer identification number 91-0219435

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Tax idemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a Receive a severance payment or change-of-control payment?	4a	Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		5a	
a The organization?	5b		
b Any related organization?			
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		6a	
a The organization?	6b		
b Any related organization?			
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		8	
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

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.

[illegible]

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
PART I, LINE 1A	BECU MAINTAINS A MEMBERSHIP AT A SOCIAL CLUB. ALL EXECUTIVES HAVE ACCESS TO THE CLUB FOR CONDUCTING MEETINGS AND TO HOST SOCIAL EVENTS. THE BENEFIT OF ATTENDING THE CLUB IS NOT TAXABLE TO THE RECIPIENT.
PART I, LINE 4B:	EVP CHIEF INFORMATION OFFICER: RECEIVED PAYMENT DUE TO VESTING OF THE SERP IN THE AMOUNT OF \$74,437. \$61,461 ACCRUAL OF 457(F) SERP. EVP CHIEF ADMINISTRATIVE OFFICER: RECEIVED PAYMENT DUE TO VESTING OF THE SERP IN THE AMOUNT OF \$291,659. \$34,213 ACCRUAL OF 457(F) SERP. EVP CHIEF DIGITAL OFFICER: RECEIVED PAYMENT DUE TO VESTING OF THE SERP IN THE AMOUNT OF \$121,749. \$69,713 ACCRUAL OF 457(F) SERP. EVP CHIEF MARKETING OFFICER: RECEIVED PAYMENT DUE TO VESTING OF THE SERP IN THE AMOUNT OF \$10,871. \$60,617 ACCRUAL OF 457(F) SERP. PRESIDENT/CEO: \$381,049 ACCRUAL OF 457(F) SERP. EVP CHIEF OPERATING OFFICER: \$231,052 ACCRUAL OF 457(F) SERP. EVP CHIEF FINANCIAL OFFICER: \$159,191 ACCRUAL OF 457(F) SERP. EVP CHIEF RISK OFFICER: \$95,802 ACCRUAL OF 457(F) SERP.

Additional Data

Software ID:
Software Version:
EIN: 91-0219435
Name: CREDIT UNIONS IN THE STATE OF WASHINGTON
BOEING EMPLOYEES CREDIT UNION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1JOHN BENSON PORTER PRESIDENT/CEO	(i)	691,097	786,034	14,901	391,395	24,674	1,908,101	0
	(ii)	0	0	0	0	0	0	0
1THOMAS MORGAN EVP CHIEF INFORMATION OFFICER	(i)	331,603	524,467	6,726	70,840	13,337	946,973	74,437
	(ii)	0	0	0	0	0	0	0
2MELANIE WALSH EVP CHIEF ADMINISTRATIVE OFFICER	(i)	309,013	520,927	1,689	41,408	24,600	897,637	291,659
	(ii)	0	0	0	0	0	0	0
3MICHAEL SCOTT STRAND EVP CHIEF OPERATING OFFICER	(i)	437,867	288,470	2,478	240,539	19,834	989,188	0
	(ii)	0	0	0	0	0	0	0
4MELBA BARTELS EVP FINANCE/CFO	(i)	462,535	245,432	4,890	171,691	20,821	905,369	0
	(ii)	0	0	0	0	0	0	0
5DOUGLAS MARSHALL EVP CHIEF DIGITAL & PRODUCT OFFICER	(i)	328,131	369,532	7,382	78,144	16,962	800,151	121,749
	(ii)	0	0	0	0	0	0	0
6JOHN STEWART EVP CHIEF RISK OFFICER	(i)	338,342	235,247	2,120	101,034	22,014	698,757	0
	(ii)	0	0	0	0	0	0	0
7THOMAS BERQUIST EVP CHIEF MARKETING OFFICER	(i)	304,066	238,488	7,935	69,005	21,874	641,368	10,871
	(ii)	0	0	0	0	0	0	0
8DANA GRAY SVP COMMERICAL & BUSINESS SERVICES	(i)	282,780	126,523	4,854	66,855	21,825	502,837	0
	(ii)	0	0	0	0	0	0	0
9TRAVIS SIMPSON SVP RETAIL, CONTACT CENTER AND WEALT	(i)	248,412	157,238	1,742	46,991	26,765	481,148	0
	(ii)	0	0	0	0	0	0	0
10GENNADIY HENRY DARAKHOVSKIY SVP TREASURY CIO	(i)	267,372	137,363	2,541	59,739	20,321	487,336	0
	(ii)	0	0	0	0	0	0	0
11MICHAEL RYAN SVP GENERAL COUNSEL	(i)	275,699	120,510	1,801	45,585	2,586	446,181	0
	(ii)	0	0	0	0	0	0	0
12LISA GROVE SVP CHIEF AUDIT EXECUTIVE	(i)	245,312	114,934	4,892	58,665	21,874	445,677	0
	(ii)	0	0	0	0	0	0	0
13SEAN MURPHY SVP CHIEF INFORMATION SECURITY OFFIC	(i)	299,071	25,000	1,854	8,538	2,955	337,418	0
	(ii)	0	0	0	0	0	0	0
14GREGG KATS SVP ADMINISTRATION & SERVICING	(i)	223,199	95,024	4,198	104,853	21,139	448,413	0
	(ii)	0	0	0	0	0	0	0
15MICHAEL ZELL SVP DIGITAL	(i)	251,343	61,699	2,589	60,195	20,774	396,600	0
	(ii)	0	0	0	0	0	0	0
16LORRAINE STEWART SVP MORTGAGE LENDING	(i)	213,069	97,038	4,642	59,838	16,942	391,529	0
	(ii)	0	0	0	0	0	0	0
17AARON BRESKO SVP CONSUMER LENDING	(i)	219,124	85,697	4,541	127,810	13,554	450,726	0
	(ii)	0	0	0	0	0	0	0
18KEN MYHRA SVP CREDIT CARD	(i)	206,508	63,490	1,230	83,781	22,197	377,206	0
	(ii)	0	0	0	0	0	0	0
19JENNIFER FANCHER SVP ENTERPRISE STRATEGIC SERVICES	(i)	199,608	69,428	1,408	47,389	22,926	340,759	0
	(ii)	0	0	0	0	0	0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21SARA MOOREHEAD SVP COOPERATIVE AFFAIRS	(i)	58,317	160,536	23,237	4,554	8,272	254,916	0
	(ii)	0	0	0	0	0	0	0
1SHAHZAD KAZI SVP CREDIT RISK MANAGEMENT & CCO	(i)	162,238	25,000	17,145	4,523	13,084	221,990	0
	(ii)	0	0	0	0	0	0	0
2ANTHONY HARRIS ASSISTANT CORPORATE SECRETARY	(i)	156,329	37,608	2,151	60,290	10,084	266,462	0
	(ii)	0	0	0	0	0	0	0
3SOLYNN MCCURDY SVP SOCIAL IMPACT & BECU FOUNDATION	(i)	166,236	0	748	2,123	9,000	178,107	0
	(ii)	0	0	0	0	0	0	0
4LINNEA WEXLER SR COMMERCIAL RELATIONSHIP MANAGER I	(i)	130,634	397,542	798	30,619	29,503	589,096	0
	(ii)	0	0	0	0	0	0	0
5MARK THOMSON VP COMPLIANCE & PRIVACY	(i)	245,789	112,139	6,501	77,414	18,042	459,885	0
	(ii)	0	0	0	0	0	0	0
6MARC WRIGHT VP BUSINESS CREDIT ADMINISTRATION	(i)	236,363	110,456	6,868	64,150	12,444	430,281	0
	(ii)	0	0	0	0	0	0	0
7MATHEW DAILEY VP INVESTMENT SERVICES	(i)	199,260	147,140	4,938	66,759	19,354	437,451	0
	(ii)	0	0	0	0	0	0	0
8KYLE WELSH VP INFORMATION SECURITY	(i)	22,806	116,427	207,870	1,682	5,501	354,286	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization
CREDIT UNIONS IN THE STATE OF WASHINGTON
BOEING EMPLOYEES CREDIT UNION

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Employer identification number

91-0219435

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	BECU IS A COOPERATIVE SOCIETY ORGANIZED UNDER WASHINGTON LAW AS A NONPROFIT CORPORATION FOR THE PURPOSE OF BRINGING PEOPLE TOGETHER TO IMPROVE THE FINANCIAL WELL-BEING OF OUR MEMBERS AND THEIR COMMUNITIES. MEMBERSHIP AT BECU IS LIMITED TO THOSE PERSONS LISTED IN THE FIELD OF MEMBERSHIP APPENDIX TO THE BYLAWS. AT ALL MEETINGS EACH MEMBER WITH ONE OR MORE FULLY PAID SHARES WILL HAVE ONE VOTE SUBJECT TO CERTAIN CONDITIONS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	BECU IS A COOPERATIVE SOCIETY ORGANIZED UNDER WASHINGTON LAW AS A NONPROFIT CORPORATION FOR THE PURPOSE OF BRINGING PEOPLE TOGETHER TO IMPROVE THE FINANCIAL WELL-BEING OF OUR MEMBERS AND THEIR COMMUNITIES. MEMBERSHIP AT BECU IS LIMITED TO THOSE PERSONS LISTED IN THE FIELD OF MEMBERSHIP APPENDIX TO THE BYLAWS. AT ALL MEETINGS EACH MEMBER WITH ONE OR MORE FULLY PAID SHARES WILL HAVE ONE VOTE SUBJECT TO CERTAIN CONDITIONS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	TAX DIRECTOR, CONTROLLER, GENERAL COUNSEL, HUMAN RESOURCES, GOVERNMENT RELATIONS AND CFO REVIEW FORM 990 AND ALL APPLICABLE SCHEDULES PRIOR TO FILING. A COPY OF THE FINAL VERSION OF THE FORM 990 IS DISTRIBUTED TO EACH BOARD MEMBER BEFORE IT IS FILED FOR INFORMATIONAL PURPOSES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL DIRECTORS, AUDIT COMMITTEE MEMBERS, OFFICERS, AND KEY EMPLOYEES ARE SUBJECT TO THE BOARD-APPROVED CONFLICTS OF INTEREST TRANSACTIONS POLICY, WHICH REQUIRES ANNUAL CERTIFICATION THAT EACH INDIVIDUAL HAS REVIEWED THE POLICY AND HAS MADE ALL REQUIRED DISCLOSURES. THE LEGAL DEPARTMENT TRACKS COMPLIANCE WITH THE ANNUAL CERTIFICATION REQUIREMENT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>MARKET COMPENSATION DATA WILL BE GATHERED FOR THE PRESIDENT'S POSITION AND THE OTHER EXECUTIVE POSITIONS AS PART OF THE BI-ANNUAL COMPETITIVE COMPENSATION ANALYSIS. THE COMPENSATION DATA FOR THE PRESIDENT'S POSITION WILL BE PROVIDED TO THE COMPENSATION COMMITTEE FOR DEVELOPING A RECOMMENDATION TO THE BOARD OF DIRECTORS REGARDING ANY COMPENSATION ADJUSTMENT. THE COMPENSATION COMMITTEE MAY ENGAGE THIRD PARTY CONSULTANTS TO ASSIST WITH THE CEO COMPENSATION REVIEW AND RECOMMENDATIONS. THE EXECUTIVE COMPENSATION DATA WILL BE PROVIDED TO THE PRESIDENT FOR DETERMINING ADJUSTMENTS FOR THE OTHER EXECUTIVE POSITIONS. THE COMPENSATION DATA WILL BE GATHERED USING A VARIETY OF INDUSTRY SURVEY SOURCES AND DATA SEGMENTS WHICH ARE THEN VALIDATED BY A THIRD PARTY. BECU'S COMPENSATION PROGRAM IS ADMINISTERED BY THE HUMAN RESOURCES DEPARTMENT AND IS AUDITED BY BECU'S AUDIT SERVICES DEPARTMENT. THE LAST COMPENSATION REVIEW WAS CONDUCTED IN 2019.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	BECU'S BYLAWS, CORPORATE GOVERNANCE OVERVIEW AND FINANCIAL DATA ARE POSTED AND AVAILABLE TO THE PUBLIC ON THE BECU.ORG WEBSITE. BECU'S FINANCIAL DATA IS ALSO AVAILABLE TO THE PUBLIC VIA THE NCUA WEBSITE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 13:	THE AUDIT COMMITTEE HAS A WHISTLEBLOWER POLICY (THE "POLICY") TO ENCOURAGE EMPLOYEES TO REPORT CONCERNS, ISSUES, COMPLAINTS, INQUIRIES, AND INFORMATION REGARDING VIOLATIONS OF THE CREDIT UNION'S ETHICS POLICIES, FAILURE TO MEET THE CREDIT UNION'S ACCOUNTING STANDARDS, AND POTENTIAL VIOLATIONS OF LAW OR REGULATIONS. THIS INCLUDES ILLEGAL OR IMPROPER CONDUCT BY THE CREDIT UNION ITSELF, BY ITS LEADERSHIP, OR BY OTHERS ON ITS BEHALF. THE POLICY IS DESIGNED TO ENSURE THAT NO EMPLOYEE FEELS AT A DISADVANTAGE FOR RAISING LEGITIMATE CONCERNS ABOUT VIOLATIONS OF THE CREDIT UNION'S ETHICS POLICIES, QUESTIONABLE ACCOUNTING ISSUES, OR LEGAL AND REGULATORY ISSUES. IN ORDER TO ENSURE THAT ALL REPORTS ARE HANDLED ANONYMOUSLY, CONFIDENTIALLY AND INDEPENDENTLY OF USUAL EMPLOYEE-MANAGER RELATIONSHIPS, THE CREDIT UNION HAS RETAINED AN INDEPENDENT THIRD-PARTY PROVIDER, ETHICSPPOINT. ANY EMPLOYEE CAN USE THE ETHICSPPOINT SYSTEM TO REPORT ANY ISSUE OR CONCERN CONFIDENTIALLY AND ANONYMOUSLY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	CONSULTING FEES 15,828,194. OTHER OUTSIDE SERVICES 9,255,921.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	OTHER COMPREHENSIVE INCOME PENSION & SERP BENEFIT PLANS -30,672,505. CURRENT YEAR CUSO INCOME -225,541.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization CREDIT UNIONS IN THE STATE OF WASHINGTON BOEING EMPLOYEES CREDIT UNION	Employer identification number 91-0219435
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Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) EMPLOYEE BENEFIT FUNDING TRUST 14025 RIVEREDGE DRIVE SUITE 280 TAMPA, FL 33637	EMPLOYEE MEDICAL & PAID TIME-OFF BENEFIT OBLIGATIONS	WA	4,238,649	350,575,049	BECU

Part II Identification 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 EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) BECU FOUNDATION 12770 GATEWAY DR S TUKWILA, WA 98168 91-1703337	SCHOLARSHIPS	WA	501(C)(3)	PF	N/A		No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(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	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

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.

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

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

No

1n

Yes

1o

Yes

1p

No

1q

Yes

1r

No

1s

No

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	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2019

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.

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation