(Rev January 2020)

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2019

		the Treasury		cial security numbers o	-	-	•	11)114	Open to Public				
Inte	rnal Revenu			.gov/Form990 for instr				V000	Inspection				
<u>A</u> _			dar year, or tax year beginni		, 2019, and end	ling	JUNE		, 20 20				
8	Check if a	pplicable	C Name of organization WASHI	NGTON REPUBLICAN	ASSN INC			D Employ	er identification number				
\sqcup	Address c	_	Doing business as				24-0753720						
\Box	Name cha	nge	Number and street (or P O bo	uite	E Telepho	one number							
	Initial retu	rn	701 WYANDOTTE STREET										
\Box	Final return	n/terminated	City or town, state or province	, country, and ZIP or foreign	postal code								
	Amended	return	BETHLEHEM, PA 18015-144		······································			G Gross r					
	Applicatio	n pending	F Name and address of principal	officer STEVE DALTON	l	јн	I(a) Is this a gro	oup return for	subordinates?				
			4510 PHEASANT RUN CT, E	BETHLEHEM, PA 18017		7. 7			s included? Yes No				
<u></u>	Tax-exem	pt status	501(c)(3) 501(c) (7) ◀ (insert no)	4947(a)(1) or527	00	If "No," a	ttach a list	(see instructions)				
ī	Website:	<u> </u>				Н	(c) Group ex	emption n	umber ►				
K Form of organization													
P	art I	ort Summary											
	1 E	Briefly des	cribe the organization's mi	ssion or most signific	ant activities:								
ce	Į į	oster and	promote good citizenship a	nd leadership in the yo	uth of our communi	ty with	donations	and sch	olarships				
Activities & Governance	<u> </u>							·					
Veri	2 (Check this	box ► ☐ if the organization	on discontinued its op	erations or dispose	ed of m	ore than 2	25% of 1	ts net assets				
Ó	3 1	Number of	voting members of the go	verning body (Part VI,	line 1a) .			3	7				
∞8	4 1	Number of	independent voting memb	ers of the governing	body (Part VI, line 1	1b) .		4					
ties	5 7	Total numb	per of individuals employed	l ın calendar year 201	9 (Part V, line 2a)			5	6				
ξΞ	6	Total numb	per of volunteers (estimate	if necessary)				6	21				
Aci			ated business revenue from), lineRECEIVE	D.	. 7.	7a	0				
			ed business taxable incon	l i			α .	7b	2062				
						24	Prior Year	-	Current Year				
4	8 (Contributio	ons and grants (Part VIII, lin	ne 1h)	NOV 2 3 202	ረሀ ጉ	<u>,</u>	545	620				
Ž			ervice revenue (Part VIII, lir	·			Ϋ́						
Revenue			income (Part VIII, column		OGDEN I			4774	4312				
æ			nue (Part VIII, column (A), I			4		47026	28942				
			ue-add lines 8 through 11					52345	33254				
_			I similar amounts paid (Par					32343					
	1		aid to or for members (Part					 					
	م حدا		her compensation, employe			<u> </u>		33858	25311				
Expenses	16a F		al fundraising fees (Part IX	<u>=</u>				33030	23311				
Ë	b 7		aising expenses (Part IX, c			1							
ă	17 (enses (Part IX, column (A),					35024	34695				
	1	•	nses Add lines 13-17 (mu					68882					
	1		ess expenses. Subtract line		iii (ri), iiiic 20) .				60006				
		teveride te	33 expenses. Oubtract line	7 10 110111 11110 12	 	Begin	ning of Curr	(16537) ent Year	(26752) End of Year				
ts o	20 7	Fotal accor	ts (Part V. line 16)			Begin							
Net Assets or	21 7		ts (Part X, line 16) ties (Part X, line 26)	• • •		 		422603	395851				
t t	21		· · · · · · · · · · · · · · · · · · ·	t line O1 from line OO	• •			400000					
	22 N		or fund balances Subtrac	t line 21 from line 20	· · · ·			422603	395851				
-			re Block					h4 -6	. I be a set of a second beat of the				
			, I declare that I have examined the Declaration of preparer (other the						y knowledge and belief, it is				
_													
Si	an I	Sugarktu	ure of officer				Date	11-16	2- 20				
	_	Signati	ames L Delma	5	A Tras		Date						
п	ere	<u> </u>	<u> </u>	DE DEC	7/105		-						
		1	r print name and title			1 = .	· 1						
Pa	iid	Print/Type	preparer's name	Preparer's signature		Date		Check					
	eparer	·	<u> </u>			<u> </u>		self-empl	Uyeu				
	se Only	C.uma'a aaa	ne 🕨			— ~		EIN ►					
		Firm's add					Phone	no ~-					
Ma	y the IRS	discuss t	this return with the prepare	er shown above? (see	instructions)	•			. ☐ Yes ☐ No				
E ~.	- Dananu	ork Badust	ion Act Notice, see the sens	rate instructions	Ca	at No. 11	282Y		Form 990 (2019)				

) (Revenue \$

1250

Other program services (Describe on Schedule O.)

Total program service expenses

including grants of \$

(Expenses \$

Form 99	0 (2010)			age \$
_				age C
Part	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	162	√
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	 	1
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		1
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		1
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_		1
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		✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		1
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		1
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
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		
С	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		
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		
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
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		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
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		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		1
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		▼
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		→
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		1
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		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		1	Ť
. •	If "Yes," complete Schedule G, Part III	19		1
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	ļ
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		/

Part	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		1				
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		√				
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		1				
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1				
С	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		1				
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		1				
đ	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		1				
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							
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		1				
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).							
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1				
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .	28b		1				
С	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		1				
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1				
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓				
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		1				
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		1				
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		_				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓				
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		1				
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		1				
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		1				
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	✓					
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a							
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		[
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	7					

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)								
			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax								
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			4.0					
b									
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) .			(oc					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	✓	•					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,								
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	.4a		✓					
b	If "Yes," enter the name of the foreign country ▶								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a _.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		✓					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or								
	gifts were not tax deductible?	6b		✓					
7.	Organizations that may receive deductible contributions under section 170(c).		透描						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	The second							
	and services provided to the payor?	7a							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	required to file Form 8282?	7c	TA PASPATOS	# P151					
d	If "Yes," indicate the number of Forms 8282 filed during the year	-	255	7-75					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	olojonininoj	71.00					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		ajájúnián)	ájumi ém					
	sponsoring organization have excess business holdings at any time during the year?	8	ME	S\$ 159					
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		1550					
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		ļ					
	Section 501(c)(7) organizations. Enter	5, 30g	- X 24 24	The forest					
10	Initiation fees and capital contributions included on Part VIII, line 12								
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter	1000	ag.	152.5					
' a	Gross income from members or shareholders	47	YEAR.	1					
b	Gross income from other sources (Do not net amounts due or paid to other sources			验					
J	against amounts due or received from them)	47.3							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? •	12a	20.000.000	فسنحمشك					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	C Soc	1100	01350					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	1 .						
	Note: See the instructions for additional information the organization must report on Schedule O	SECTION S	or X	的型					
ь	Enter the amount of reserves the organization is required to maintain by the states in which								
_	the organization is licensed to issue qualified health plans								
, c	Enter the amount of reserves on hand		W.						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15	'	Ì					
	If "Yes," see instructions and file Form 4720, Schedule N.	Charles and Control	推进						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		/					
	If "Yes," complete Form 4720, Schedule O.	影響	物質的						

Form 95				Page 0
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	see ii	istruc	lions.
Secti	on A. Governing Body and Management :	<u>···</u>	-	· <u>V</u>
Secu	on A. doverning body and management		Yes	No
1a .	Enter the number of voting members of the governing body at the end of the tax year 1a			1000
	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		1	
	committee, explain on Schedule O.		# 44.	
•	Enter the number of voting members included on line 1a, above, who are independent 1b 7			
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	E-Palliannin	√ ·
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		√
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6	✓	
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	1	
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	✓	7 të 251
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	√	-392900411
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
- 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 on Schedule O	9		✓.
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	,
-			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
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	√	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	THE		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		-
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		-
, 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		
13	Did the organization have a written whistleblower policy?	13		√
14	Did the organization have a written document retention and destruction policy?	14	e salaminos	847 (1881)
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?		n oppolin	
а	The organization's CEO, Executive Director, or top management official	15a	ļ	✓
þ	Other officers or key employees of the organization	15b	J. 2000)	Alle Spane 1978
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
L	with a taxable entity during the year? If "Ycs," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a	o de la composición dela composición de la composición de la composición de la composición dela composición de la composición de la composición dela composición dela composición de la composic	✓
D	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		
Secti	on C. Disclosure	100	L	
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 Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	Γ (Sec	tion !	501(c)
	(3)s only) available for public inspection. Indicate how you made these available Check all that apply. Own website Another's website Other (explain on Schedule O)			•
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f inte	reet p	oolicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	>	
	JAMES DELMORE, 2041 KEMMERER ST, BETHLEHEM, PA 18017 610-866-2521			

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Page	1

Form	qqn	(201	ı٩١

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and 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	u orga	anız			Suibe	nsa	iteo any current o	officer, director,	or trustee
					C)					
(A)	(B)	Position (do not check more than one				(D)	(E)	(F)		
Name and title	Average hours per week	box,	box, unless person is both officer and a director/truste		an tee)	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation		
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) STEVE DALTON										
PRESIDENT	11			✓.				0	0	0
(2) JOE TIMAR										
VICE-PRESIDENT	1			✓				0	0	0
(3) JAMES DELMORE										
SECT/TRES	6			✓				0	0	0
(4) DAVE MAXWELL	ļ									
TRUSTEE	1	✓		L				0	0	0
(5) RICK DAVIS										
TRUSTEE	1	✓						0	0	0
(6) DENNIS ORTWIEN										
TRUSTEE	11	✓	<u>L</u>	ļ	<u></u>		ļ	0	0	0
(7) SCOTT BENWAY										
TRUSTEE	1	✓						0	<u> </u>	0
(8)										
(9)										
(10)										
(11)										
(12)										-
(13)							-			
(14)										

Part	VII Section A. Officers, Directors, 7	rustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated I	Emplo	yees (c	ontinued)
					(6	C)							
	(A)	(B)	(do n	ot ch		ition	e than c	nna.	(D)	(E)			(F)
	Name and title	Average	box,	unles	ss pe	rson	is both	an	Reportable	Report			ted amount
		hours per week		T	_	т —	or/trust	, <u> </u>	compensation from the	compens from rel			other pensation
		(list any	일	Inst	Officer	Key employee	불투	Former	organization	organiza	itions	fro	om the
		hours for related	rec	Ē	βğ	em	loye) ac	(W-2/1099-MISC)	(W-2/1099	-MISC)	-	zation and organizations
		organizations	학 #	nal		рloy	e con					Tolatoo C	n gamzation o
		below dotted line)	Individual trustee or director	Institutional trustee		ee	pen						
			"	ee e	İ		Highest compensated employee						
(15)			-		┢	1	-	-					
11.27			1		İ								
(16)													
3			1		1								
(17)										-			
(18)					1								
				_	L	<u> </u>							
(19)					1								
/00			-	ļ	ļ	ļ	<u> </u>	_					
(20)		ļ	1										
(21)			-	 	<u> </u>	\vdash	-						
(21)			1		ŀ								
(22)					\vdash	╁		┢					
<u> </u>			1										
(23)					t		-						
3			1			ŀ							
(24)												-	-
(25)													
1b	Subtotal					•		•	0		. 0		0
C	Total from continuation sheets to Part			•				•	0		0		0
d	Total (add lines 1b and 1c)							<u>, </u>	0		0		0
2	Total number of individuals (including but reportable compensation from the organic		o to tr	1056	e list	tea	above	e) w		e than \$1	00,000	ot	
	reportable compensation from the organi	Zation			-				0				Yes No
3	Did the organization list any former of	officer dire	actor	tru	icto	م ا	(O) (mol	lovee or highes	t compa	neatod	r-	163 110
3	employee on line 1a? If "Yes," complete							p	· · · ·			3	
4	For any individual listed on line 1a, is the							່ ກາລ		nsation fr	om tho	⊢	ոն ող և ար հոնանում
•	organization and related organizations												
	ındıvıdual			•								4	
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsa	tion	fro	m any	un u	related organiza	tion or inc	ividual		
	for services rendered to the organization	? If "Yes," c	compi	lete	Sch	hedi	ule J f	or s	such person			5	✓ ✓
Secti	on B. Independent Contractors												
1	Complete this table for your five high												
	compensation from the organization. Rep	ort compen	satioi	n to	r the	e ca	lenda	r ye		within the	e organ		s tax year.
	(A) Name and business add	Iress							(B) Description of sen	/ices	ſ	(C) Compens	ation
	. Takito una odomosa doc							-					
								\vdash					
						-		-					-
						-		 	 -				
	•							T					-
2	Total number of independent contractor	ors (includii	ng bu	ut n	ot	lımı	ted to	th	nose listed abov	e) who			
	received more than \$100,000 of compens								0				

Part	VIII.	Check if Schedule O contains a re	spon	se or note to ar	v line in this Pa	rt VIII		
· ,	,		``	· •	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts S	·1a	Federated campaigns	1a				4945	
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	620		and the second second second		
ع ق	С	Fundraising events	1c		44.		dentina a mandalling rapiding	
Gifts, ilar An	d	Related organizations	1d					
اعَ ق	e	Government grants (contributions)	1e					
Sis	f	All other contributions, gifts, grants,					AND SETTING	
를 들		and similar amounts not included above					45446	
출하	g	Noncash contributions included in		-				
Contributions, and Other Sim		lines 1a-1t	1g	\$	25 10 75 15 A 10 A	554		
OB	h	Total. Add lines 1a–1f		<u> </u>	620	200		F07.2574135
		·		Business Code				
Program Service Revenue	2a	·				•		
Le el	b							
n S	C							
gram Ser Revenue	d							
§ _	e	All all and a second and a second as a seco						
•	1	All other program service revenue	•	. •			STEEL MARKAGES (ST	STEETEN GESTELL DES
-	<u>g</u>	Total. Add lines 2a-2f Investment income (including divided)	· dondo	<u>-</u>			THE CONTRACT OF STREET	CONTRACT SHAPE OF STREET
-	3	other similar amounts) .	uenus	s, interest, and	4312			
	4	Income from investment of tax-exem	not ha	nd proceeds	4372		,	
,	5	Royalties	>					
, Z)	-	(i) Real	1	(II) Personal	(45)			
	6a	Gross rents 6a						
	b	Less rental expenses 6b						
	C	Rental income or (loss) 6c				Section of the sectio		pursuanting and the second
	d			🕨				
	7a	Gross amount from (i) Securit	ites	(II) Other				
		sales of qaasta	•	,				
		other than Inventory 7a			paramanini (la finalmini di kederaki Histori)			
e n	b	Less cost or other basis						
Revenue		and sales expenses 7b						
è	C	Gain or (loss) 7c			[3]:3\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	212 41 X 10 Y 10		15.244 V. A. CODE (**)
ē	d	Net gain or (loss)		<u>•</u>	2012/97/2014 9/202	William Strategies		
흎	8a	Gross income from fundraising						
		events (not including \$ of contributions reported on line			Since the Crellets (
	`	1c). See Part IV, line 18	8a				954	10.7
Ĭ	ь	Less. direct expenses .	8b	960			art emiletis	
	C	Net income or (loss) from fundraisin			960		- The Late of Market Strate of the Control of the C	THE SHADOWS AND AND THE STATES
	9a	Gross income from gaming	1		43% (A.A.A.A.A.			
	-	activities See Part IV, line 19	9a	7583				
	b	Less direct expenses .	9b	4194				
	С	Net income or (loss) from gaming as	ctivitie	es 🕨	3389			
	10a	Gross sales of inventory, less						Proteins
		returns and allowances	10a	47761				
•	b	Less: cost of goods sold	10b	23788				A. irington
	С	Net income or (loss) from sales of in	vento		23973	and what have been view and and	Show own by the state of the state of	A LOUIS A PART, NAME OF SKY AVE AND AND AND
ns				Business Code				CEANDAES.
ne ue	11a			_				-
llar	b					ļ. <u>.</u>		
scellaneo Revenue	. C	All ables and				 		ļ
Miscellaneous Revenue	d	All other revenue		L		NAME OF TAXABLE PARTY.	C (() () () () () () () () ()	
	12	Total rayonus See patrustions	•	<u>></u>	2225	51V1,\$#####		
	12	Total revenue. See instructions			33254	1 .	I	1

	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)								
Sectio				must complete colu	umn (A)				
	- Check if Schedule O contains a response	,	· · · · · · · · · · · · · · · · · · ·		· · · · : 📙				
	t include amounts reported on lines 6b, 7b, , 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 .		,						
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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				-				
6 `	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .		, `	•	- , v				
. 7	Other salaries and wages	19843		•	<u></u>				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				, ,				
9	Other employee benefits	-							
10	Payroll taxes	5468							
11	Fees for services (nonemployees)								
а	Management	l							
- b	Legal				4.				
, C	Accounting								
∴ d	Lobbying								
	, ,		Charles and the contract	Constituent and a section of the sec	,				
`e	Professional fundraising services. See Part IV, line 17		CONTROL OF THE PARTY OF						
T	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) .				1				
12	Advertising and promotion		,		1				
13	Office expenses	1425							
14	Information technology	,			,				
15	Royalties								
16	Occupancy				·				
17	Travel								
	Payments of travel or entertainment expenses								
18	for any federal, state, or local public officials								
19 -20	Conferences, conventions, and meetings . Interest				L.				
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .								
23	Insurance	4904							
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If	Tetra di S			-1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1				
	line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O)	and the second							
а	UTILITIES	0000	SEENALS LEVEN SOMEONINGS THE NAME OF	LUCTON AMORE AND MARKET AND AND AND AND AND AND AND AND AND AND	2x3x4xxx d814x67xxxx 3.4 27,7x45x				
	MAINTENANCE	8866							
Ь		4771	 	<u> </u>					
C	LICENSE/TAXES	14631			• • • • • • • • • • • • • • • • • • • •				
· d	BANK FEES	98		`					
е	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	60006							
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundrouse policytetes.			. 7.					
	fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)	-							

Part X	Balance	Sheet
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		Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		(B) End of year
,	1	Cash—non-interest-bearing	. 422603	1	39585
	2	Savings and temporary cash investments	•	2	,
, 7	3 -	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	Linear Street, Section Section Section
	.5	Loans and other receivables from 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)		<u>///</u>	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	, ,
	10a	Land, buildings, and equipment. cost or other basis Complete Part VI of Schedule D . 10a			
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments – publicly traded securities	- "	11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	422603	16	39585
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	, .	21	
Liabilities	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	แล้วใหม่ รายสมให้เรื่องหนึ่งที่สมให้เราขนะเล่า ปี	22	A state of thought
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	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	•	25	
	26	Total liabilities. Add lines 17 through 25		26	
alances		Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.			
	27	Net assets without donor restrictions		27	
I B	28	Net assets with donor restrictions		28	
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund .		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds	-	31	
et /	32	Total net assets or fund balances	422603	32	395851
Ž	33	Total liabilities and net assets/fund balances		33	
		-			Form 990 (2010

•					
Form 99	90 (2019)			Pa	ge 12
Part	XI Reconciliation of Net Assets				
	Check 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			33254
2	Total expenses (must equal Part IX, column (A), line 25)	2			60006
3	Revenue less expenses Subtract line 2 from line 1	3		(2	6752)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			
5	Net unrealized gains (losses) on investments	5			
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 on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10		3	95851
Part	Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	· · · ·			
1	Accounting method used to prepare the Form 990. Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O	xplain in		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were correviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	npiled or	, , ,		7 gmm
b	Were the organization's financial statements audited by an independent accountant?		2b		√
	If "Yes," check a box below to indicate whether the financial statements for the year were audi separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	ted on a	7	**	
_	·	arciaht of			<u> </u>
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the audit, review, or compilation of its financial statements and selection of an independent accounts	_	2c		

If the organization changed either its oversight process or selection process during the tax year, explain on

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

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 on Schedule O and describe any steps taken to undergo such audits

Schedule O.

Single Audit Act and OMB Circular A-133?

Form **990** (2019)

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3b

SCHEDULE O *(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

WASHINGTON REPUBLICAN ASSN INC	24-0753720							
PART VI SECTION A								
7A ALL MEMBERS OF THE ASSOCATION ARE ABLE TO ELECT THE BOARD OF DIRECTORS								
7B ALL DECISIONS INVOLVING EXPEDITURES OVER \$1000 00 ARE SUBJECT TO APPROVAL BY THE MEMBERS								
11A YES. A COPY OF FORM 990 IS MADE AVAILABLE TO THE BOARD OF DIRECTORS AT A MONTHLY MEETING BEFORE IT IS FILED.								
19 ALL COVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STSATEMENTS AR	E OPEN TO REVIEW TO ALL MEMO							
······································	······							
	·							