Short Form 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

Department of the Treasury

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

Open to Public

Inter	nal Rever	nue Service	► Go to www.irs.gov/Fo	rm990EZ for instructions	and the la	atest inform	ation.				
A F	or the	2019 calend	ar year, or tax year beginning	September 1	, 2019,	and ending		ugust 31	, 20 20		
В	heck if ap	If applicable C Name of organization 2						Employer identification number			
	Address change		الله Walla Valley Education Asso	ociation				9108	882363		
	Name cha	ange	Number and street (or P O box if mail is i	not delivered to street address	3) ?1	Room/suite	E Tele	E Telephone number			
=	Initial return		5 W Alder St			231		509-525-7810			
=		rn/terminated	City or town, state or province, country, a	and ZIP or foreign postal code		96	F Gro	up Exemp	tion		
\equiv	Amended Applicatio	n pending	Walla Walla, WA 99362			UV	Nur	Number ▶ ?:			
		ting Method	✓ Cash	pecify) >	-		H Check	▶ ☐ if th	e organization is no		
	Vebsite	-	wwvea org		_				Schedule B		
			eck only one) — 501(c)(3) 501(c	:) (6) ∢ (insert no)	1947(a)(1) o	r	(Form 9	990. 990-E	Z, or 990-PF)		
		organization			Other						
			7b to line 9 to determine gross receip			more, or if to	tal assets				
			\$500,000 or more, file Form 990 instea		,	•		▶ s	139,558 9		
	art I		e, Expenses, and Changes in		d Balano	es (see th	ne instru	ctions fo			
			the organization used Schedule								
02	1		ons, gifts, grants, and similar amo		quoditori	in timo i ui		11	\$2,800 00		
?:	1		ervice revenue including governm					2			
?	1	-	up dues and assessments					3	\$136,754 46		
7		Investmen	•					4	V100/100		
44	1 _		ount from sale of assets other than	n inventory	. 5a	1		+			
	5a		or other basis and sales expense	•	—			1			
	b		ss) from sale of assets other than			I		5c			
	6 6	-	nd fundraising events.	inventory (Subtract line	30 1101111	iiie Jaj .	• •	30			
	-	_	ome from gaming (attach Sch	adule G if orester th	nan						
đ	a				. 6a	1					
Revenue						f contributi	000	1 1			
eve	b		ome from fundraising events (not i raising events reported on line 1)			i contributi	Oris				
ď			ch gross income and contributions			ı					
			•			<u> </u>		-			
	C		ct expenses from gaming and fund	whtract	-						
	d		e or (loss) from gaming and fund		ies da aii	u ob anu s	oubliaci	64			
	_	•			 			6d			
	7a		es of inventory, less returns and al			 		1			
	b		3		. <u> 7b</u>	<u> </u>		┤ │			
	C		fit or (loss) from sales of inventory					7c	\$4.49		
	8		-	7				8	\$139,558 95		
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7		<u> </u>	• • •	<u> P</u>	9	\$1,000 00		
	10		d similar amounts paid (list in Sch	edule O)	DEC) [\ / [10	\$1,000 00		
	11	-	aid to or for members	- tta- P 7	RE	CEIVE	$0 \cdot \cdot 1$	11	\$20,741 0		
Expenses	12		ther compensation, and employed				ان ۱	12	\$20,7410		
	13	Profession	al fees and other payments to inc y, rent, utilities, and maintenance	lependent contractors	JΔN.	1 9 202	1 181	13	¢40,000,0		
ā.	14	•	•	f 1	, , ,,,,,	~ . ~ .८७८	RS-OSC	14	\$10,892 34		
W	15	0.,	ublications, postage, and shipping	<u> </u>	^~-		ايقاسا	15	\$55.00		
	16		enses (describe in Schedule O)	7	UGD	EN. U		16	\$99,689 29		
	17		enses. Add lines 10 through 16 .				· •	17	\$132,377 72		
ţ	18		(deficit) for the year (subtract line			\		18	\$7,181 23		
Net Assets	19		or fund balances at beginning			-	ee with				
As		•	ar figure reported on prior year's r					19	\$70,098 77		
ét	20		nges in net assets or fund balance					20			
~	1 21	Not accate	or fund halances at and of year	Combine lines 18 through	ah 20			21	\$77,280.00		

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form 990-EZ (2019)



		Check if the organization is						
		Officer in the organization d	sed Schedule	O to respond to a	ny question in this			<u> </u>
					_	(A) Beginning of year		(B) End of year
22		, savings, and investments				\$70,098 77		\$77,280 00
23		l and buildings			<u> </u>		23	
24		r assets (describe in Schedul	•				24	
25		lassets				\$70,098 77		\$77,280 00
26		I liabilities (describe in Sched					26	
27		assets or fund balances (line				\$70,098 77	27	\$77,280 00
Pa		Statement of Program Se		•				
		Check if the organization us				Part III 🗌	/n	Expenses
Wha	at is the o	organization's primary exemp	ot purpose?	Negotiating contrac	ts for members			uired for section c)(3) and 501(c)(4)
Des	cribe the	e organization's program ser	vice accomplis	shments for each o	of its three largest p	rogram services,		nizations, optional for
as r	neasure	d by expenses. In a clear a	ind concise m	anner, describe the			othe	rs)
pers	ons ben	efited, and other relevant info	ormation for ea	ich program title.				
28								
								_
.51	(Grants)	If this amount	includes foreign gra	ants, check here .	▶ 🗆	28a	\$132,377 72
29								
	***********					 -		
	(Grants	s \$ <u>)</u>	If this amount	includes foreign gra	ants, check here .	▶ 🗀	29a	
30								
	(Grants	s \$)_	If this amount	includes foreign gra	ants, check here .	> 🔲	30a	
31	Other p	program services (describe in	Schedule O)					
	(Grants	\$\$)	If this amount	includes foreign gra	ants, check here .	▶ □	31a	
32	Total p	program service expenses (add lines 28a t	brough 21al				4400 077 70
		vo 2. avv. aa. 1.00 avbavoo /	add inies zoa i	mough sia)		🕨	32	\$132,377 72
Pai	t IV	List of Officers, Directors, Tru	stees, and Key	Employees (list eacl	h one even if not comp	pensated-see the in		
Pa	t IV		stees, and Key	Employees (list eacl	h one even if not comp ny question in this	pensated—see the in Part IV	struc	tions for Part IV)
Pa	t IV	List of Officers, Directors, Tru	stees, and Key	Employees (list each O to respond to a (b) Average	ny question in this (c) Reportable	pensated — see the in Part IV	struc	tions for Part IV)
Pa	t IV	List of Officers, Directors, Tru	stees, and Key	Employees (list each O to respond to a (b) Average hours per week	ny question in this (c) Reportable 21 compensation (Forms W-2/1099-MISC)	pensated—see the in Part IV	struc	tions for Part IV)
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Part	Other Information (Note the Schedule A and personal benefit contract statement requirements			_
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s Part	Yes	No No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	163	₩ <u>₩</u>
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		_
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		
c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		~
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		~
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b	, gr. 1	- 1. A.
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	4 2	110
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved	: CX	46	4.20
39	Section 501(c)(7) organizations. Enter.			2004 7.5的
а	Initiation fees and capital contributions included on line 9			
40a	Gross receipts, included on line 9, for public use of club facilities			
40a	section 4911 ▶ ; section 4912 ▶ , section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	قىق	
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	100	
41 ·	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ▶ Walla Walla Valley Education Association Located at ▶ 5 W Alder St, Ste 231, Walla Walla, WA ZIP + 4 ▶	509-52 993)
b	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)?	42b	Yes	No
	If "Yes," enter the name of the foreign country ▶	471S	- et (%)	77.7
•	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country	42c		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	•	.	-
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	(2) 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Yes	No Par
	completed instead of Form 990-EZ	44a		V 3933
b	completed instead of Form 990-EZ	44b	-50000	STREETS
c d	Did the organization receive any payments for indoor tanning services during the year?	44c	12	
	explanation in Schedule O	44d		~
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	15000	
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b		

Form 99	0-EZ (2	019)						F	age 4	
46		he organization engage, directly or in						Yes		
		ndidates for public office? If "Yes," o		, Part I	· <u>· · ·</u>		46	L		
Part		Section 501(c)(3) Organizations All section 501(c)(3) organization 50 and 51.	s must answer que				e tables f	or line	es	
		Check if the organization used Sch	nedule O to respond	to any question in	this Part V	<u> </u>	• • •			
47		he organization engage in lobbying? If "Yes," complete Schedule C, Pan		section 501(h) electi		during the	tax 47	Yes	No 2	
48	•	organization a school as described in)? If "Yes," complete	Schedule E		10		7	
49a	Did tl	he organization make any transfers to	o an exempt non-cha	ritable related organ	ızatıon? .		. 49a			
b	If "Yes," was the related organization a section 527 organization?									
50									d key	
	empi	oyees) who each received more than	\$100,000 of comper	1			ie, enter in	ione.		
	(a)	Name and title of each employee	(c) Reportable compensation (Forms W-2/1099-MISC	henefit plans and deferred other compans						
						 -				
					<u> </u>					
f		number of other employees paid over								
51		plete this table for the organization' ,000 of compensation from the orga			t contracto	rs who each	n received	more	than	
	(a)	Name and business address of each independ	lent contractor	(b) Type of ser	rvice	(c)) Compensati	on		
					······································					
	_					 				
						 				
d	Total	number of other independent contra	actors each receiving	over \$100,000 .	. >					
52		the organization complete Schedu pleted Schedule A	ile A? Note: All se	ction 501(c)(3) orga		must attacl	ha ▶ <mark>∐Yes</mark>		No	
Under p	enalties	of perjury, I declare that I have examined this r	eturn, including accompan	ying schedules and statem	nents, and to the	ne best of my kr	nowledge and	bekef,	ıt ış	
true, cor	rect, an	d complete Declaration of preparer (other than	officer) is based on all into		nas any know	17 ~	10-2			
Sign		Signature of officer				ate o	17 ~ (<u>ر</u>		
Here	??	Keith Swans	int		[2	- 19 -	20			
		Type or print hame and fittle Print/Type preparer's name	Preparer's signature	D	ate	Check	r PTIN			
Paid Prepa	arer					self-emplo	yed			
Use (Firm's name ▶				m's EIN ▶				
Marrie	o IDC	Firm's address ► discuss this return with the preparer	chown above? Soo:	netructions		none no	▶ □ ∨ ₆ ,			
iviay (f	10 IUO	discuss this return with the preparer	SHOWIT ADOVE! SEE!	113111111111111111111111111111111111111	· · · · ·		► _ Yes	<u> </u>	<u> </u>	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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 Name of the organization 910882363 Walla Walla Valley Education Association Form 990-EZ, Part 1, Line 8, Other Revenue \$4 49 Form 990-EZ, Part 1, Line 10, Grants and Similar Amounts Paid \$500 00 to Esmeralda Rojero Gonzalez, \$500 00 to Aldo Feria Form 990-EZ, Part 1, Line 16, Other Expenses Committee/ Association Expenses \$5,948 16 Form 990-EZ, Part 1, Line 16, Other Expenses Conferences/ Conventions \$35 00 Form 990-EZ, Part 1, Line 16, Other Expenses: Insurance \$331 00 Form 990-EZ, Part 1, Line 16, Other Expenses. Negotiation Expenses \$10,903 43 Form 990-EZ, Part 1, Line 16, Other Expenses President's Office \$74,083 53 Form 990-EZ, Part 1, Line 16, Other Expenses Office Supplies and Equipment \$683 18 Form 990-EZ, Part 1, Line 16, Other Expenses Telephone/ Internet \$1,770 28 Form 990-EZ, Part 1, Line 16, Other Expenses Taxes Paid \$5,934 71