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

Department of the Treasury Internal Revenue Service

▶ 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.

<u> </u>	or u	le 2020 calendar year, or tax year beginning and e	enaing						
В	Check it applicat	C Name of organization		D Employer identific	cation number				
	Addr								
	Nam chan	ge Doing business as		91-1638890					
	Initia retur	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r				
	Final	/ ZJOO BOCHID AVENOE		509-663-	7713				
	termi ated	n e	City or town, state or province, country, and ZIP or foreign postal code						
	Ame	nded WENTATICHEE WA 00001	G Gross receipts \$ 3,005,500. H(a) Is this a group return						
Г	Appl tion			for subordinates					
	pend	SAME AS C ABOVE		H(b) Are all subordinates included? Yes No					
T :	Tax-ex	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) $4947(a)(1)$ or	527	1	list. See instructions				
		ite: WWW.WAEF.ORG	OL!	H(c) Group exemption					
		of organization: X Corporation Trust Association Other	I Year		1 State of legal domicile; WA				
	art I	Summary	L 1001	or formation: = = = = 1	otato or logar dominino,				
	1	Briefly describe the organization's mission or most significant activities: IMPAC	T LIV	ES THROUGH A	ACCESS TO				
Activities & Governance	'	EDUCATION.							
rna	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	sets.				
Ş.	3	Number of voting members of the governing body (Part VI, line 1a)		3	21				
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	21				
ο O	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			4				
itie	6	Total number of volunteers (estimate if necessary)			200				
ξį	7 a			7a	0.				
⋖	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.				
				Prior Year	Current Year				
4	8	Contributions and grants (Part VIII, line 1h)		1,499,463.	1,534,845.				
nue	9	Program service revenue (Part VIII, line 2g)		0.	0.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		100,126.	225,027.				
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		145,455.	203,940.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,745,044.	1,963,812.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,141,369.	1,034,645.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		262,428.	339,895.				
ses	169	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Expenses	"	Total fundraising expenses (Part IX, column (D), line 25)	2.	• •					
ă	17			202,277.	124,327.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,606,074.	1,498,867.				
	19	Revenue less expenses. Subtract line 18 from line 12		138,970.	464,945.				
		nevenue less expenses. Subtract line 10 from line 12		ginning of Current Year	End of Year				
Net Assets or	20	Total accests (Part V. line 16)	ье	7,917,382.	9,048,126.				
ASSE D. J.	21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		3,824,966.	4,124,820.				
let /	22	Net assets or fund balances. Subtract line 21 from line 20		4,092,416.	4,923,306.				
P	art II			4,002,410*	4,525,500.				
		alties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	inter and to the heet of my	knowledge and helief it is				
		ect, and complete. Declaration of preparer (other than officer) is based on all information of whic		· · · · · · · · · · · · · · · · · · ·	Kilowieuge allu bellet, it is				
tiuc	, сопе	to, and complete, beclaration of preparer (other than officer) is based on an information of whice	ui preparei	lias any knowledge.					
C:	_	Signature of officer		I Date					
Sig		JENNIFER WITHERBEE, EXECUTIVE DIRECTOR		2410					
Hei	е	Type or print name and title							
			Тг	Date Check	PTIN				
De!	4	Print/Type preparer's name Preparer's signature STACY SHORT STACY SHORT		4 /20 /04 i					
Pai			ĮU		41-0746749				
	parer	Firm's name CLIFTONLARSONALLEN LLP Firm's address 1202 N 16TH AVE., STE 100	Firm's EIN ▶	41-0/40/47					
use	Only	•		Dham / E	09) 823-2910				
		•		[Phone no. (5					
Ma	y the	IRS discuss this return with the preparer shown above? See instructions			X Yes No				

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Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE WASHINGTON APPLE EDUCATION FOUNDATION IS THE CHARITY OF THE TREE
	FRUIT INDUSTRY. OUR MISSION IS TO IMPACT LIVES THROUGH ACCESS TO
	EDUCATION.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
•	'
3	· / / · · · · · · · · · · · · · · · · ·
	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 \$1,104,198. including grants of \$1,011,862.) (Revenue \$)
	FRUIT INDUSTRY SCHOLARSHIPS WERE PROVIDED TO 315 STUDENTS RAISED IN
	TREE FRUIT INDUSTRY FAMILIES AND COMMUNITIES AND TO INDIVIDUALS
	PURSUING A CAREER IN THE TREE FRUIT INDUSTRY.
	(Code:) (Expenses \$ 182,358. including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$182,358 • including grants of \$22,783 •) (Revenue \$) ASSISTANCE WAS PROVIDED FOR COLLEGE ACCESS AND SUPPORT PROVIDED BEYOND
	THE SCHOLARSHIP. A NEW WEBSITE WAS CREATED TO PROVIDE SCHOLARSHIP
	TRAINING TO STUDENTS OUTSIDE OF THE CLASSROOM, VIRTUAL SCHOLARSHIP
	APPLICATION TRAINING SESSIONS WERE OFFERED FOR HIGH SCHOOL STUDENTS,
	AND SUPPORT FOR HIGH SCHOOL STUDENTS AND COUNSELORS WAS PROVIDED FOR 45
	SCHOOL DISTRICTS. CAREER DEVELOPMENT SERVICES WERE ALSO PROVIDED TO
	STUDENTS IN THESE DISTRICTS.
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 1,286,556.
	Form 990 (2020)

WASHINGTON APPLE EDUCATION FOUNDATION

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		х
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	Х	
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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
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?			٦,
	If "Yes," complete Schedule D, Part IV	9		X
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	_X_	
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.			
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	X	
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		Х
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		Х
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
ızu	, ,	12a	Х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		
b		12b		v
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		-21
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	441.		х
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			3,7
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			3,7
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
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	X	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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		Х

Pai	t IV Checklist of Required Schedules (continued)						
	Too mindow		Yes	No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			110			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х				
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		Х			
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		Х			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
	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		X			
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		X			
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		X			
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		X			
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			ا			
	"Yes," complete Schedule L, Part IV	28a		X			
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X			
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			3,7			
	"Yes," complete Schedule L, Part IV	28c	-	X			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			, v			
•	contributions? If "Yes," complete Schedule M	30		X			
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	00		_v			
20	Schedule N, Part II	32		X			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x			
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		1			
34		34		x			
35.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X			
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000					
	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?	000					
If "Yes," complete Schedule R, Part V, line 2							
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		х			
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	Х				
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part V						
			Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	L					
)					
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						

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(gambling) winnings to prize winners?

Form 990 (2020) WASHINGTON APPLE EDUCATION FOUNDATION 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 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
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		
	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		X
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).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۵.		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		Х	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a 7b	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	76	-22	
С		7c		x
ч	1-1	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	isa		
h	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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	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		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
		F	aan	(0000)

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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 line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

						X			
Sec	tion 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	1a	21						
	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 on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent	1 b	21						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other						
	officer, director, trustee, or key employee?			2		_X_			
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision						
	of officers, directors, trustees, or key employees to a management company or other person?			3		_X_			
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was	filed?	4		X			
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?								
6	Did the organization have members or stockholders?			6		_X_			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximately appr	point o	ne or						
	more members of the governing body?			7a		_X_			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	tockhol	ders, or						
	persons other than the governing body?			7b		_X_			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	following:						
а	The governing body?			8a	X				
b	Each committee with authority to act on behalf of the governing body?			8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rear	ched at	the						
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)						
					Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a		_X_			
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters,	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	y before	e filing the form?	11a	X				
b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	icts?	12b	X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? $\slashed{\it ff}$ " $\slashed{\it ff}$	es," de	escribe						
	in Schedule O how this was done			12c	X				
13	Did the organization have a written whistleblower policy?			13	X				
14	Did the organization have a written document retention and destruction policy?			14	X				
15	Did the process for determining compensation of the following persons include a review and approva	ıl by inc	lependent						
	$persons, comparability\ data,\ and\ contemporaneous\ substantiation\ of\ the\ deliberation\ and\ decision?$								
	The organization's CEO, Executive Director, or top management official			15a	X				
b	Other officers or key employees of the organization			15b		X			
	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 arranger	nent wi	th a						
	taxable entity during the year?			16a		<u>X</u>			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	-	· · · · · ·						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ								
	exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► NONE								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990-	T (Section 501(c)(3)	s only)	availal	ble			
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website X Upon request Other (explain		•						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	f interest policy, and	d financ	ial				
	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 boo	oks and	records						
	JENNIFER WITHERBEE - 509-663-7713 2900 EUCLID AVENUE WENATCHEE WA 98801								
	a zoo edullo Avenue Wenallee WA 70001								

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.

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

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

(A) Name and title	(B) Average hours per	(do	not c	Pos	C) ition		one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director			irecto	Highest compensated employee	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JENNIFER WITHERBEE	40.00									
EXECUTIVE DIRECTOR				Х				115,917.	0.	11,283.
(2) CHRIS WILLETT	1.00	ļ								_
CHAIRMAN		Х		Х				0.	0.	0.
(3) JEFF FAGG	1.00	l								
VICE CHAIRMAN		Х		Х				0.	0.	0.
(4) LAURIE KNEBUSCH	1.00	1								
SECRETARY		Х		Х				0.	0.	0.
(5) DWAINE BROWN	1.00								_	_
TREASURER		Х		Х				0.	0.	0.
(6) DARRIN BELTON	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(7) LA VERNE BERGSTROM	1.00	1								
DIRECTOR		Х						0.	0.	0.
(8) DENNIS BIGNESS	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(9) IRENE BIRDSALL	1.00								_	_
DIRECTOR (AS OF 8/2020)		Х						0.	0.	0.
(10) KAILAN DUNN	1.00									
DIRECTOR		Х						0.	0.	0.
(11) JAMES FOREMAN	1.00									
DIRECTOR (THRU 8/2020)		Х						0.	0.	0.
(12) NATE FULTON	1.00									
DIRECTOR (AS OF 8/2020)		Х						0.	0.	0.
(13) BART GEBERS	1.00									
DIRECTOR		Х						0.	0.	0.
(14) CORY GROVES	1.00									
DIRECTOR		Х						0.	0.	0.
(15) DALE HALL	1.00	1								_
DIRECTOR (AS OF 8/2020)		Х						0.	0.	0.
(16) BEN JENSEN	1.00	1						_	_	_
DIRECTOR		Х						0.	0.	0.
(17) KRISTIN KERSHAW-SNAPP	1.00	_						_		_
DIRECTOR		Х						0.	0.	0 • Form 990 (2020)

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Part VII Section A. Officers, Directors, Trus								Compensated Employee	S (continued)	-00		Fage 9	
(A)	(B) (C)							(D)	(E)	Т	(F)		
Name and title	Average	(do	not c	Pos	itior		one	Reportable	Reportable		Estimated		
	hours per week		, unle					compensation	compensation from related			ount of	
	(list any	tor						from the	organizations		other compensation		
	hours for	r director				ted		organization	(W-2/1099-MISC)	,		m the	
	related	stee o	rustee			pensat		(W-2/1099-MISC)			•	nization	
	organizations below	ual tru	ional t		ployee	t com						related nizations	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organ	iizatioi is	
(18) LARRY MARTIN	1.00	_	-		<u>×</u>	1 0				十			
DIRECTOR		Х						0.	0).		0.	
(19) ROLANDO MARTIN	1.00									丁			
DIRECTOR		Х						0.	0	١. ا		0.	
(20) BOB MAST	1.00												
IMMEDIATE PAST CHAIRMAN		Х						0.	0).		0.	
(21) TYLER PRICE	1.00	ļ											
DIRECTOR (AS OF 8/2020)	1 00	Х						0.	0) .		0.	
(22) RUTH PRINGLE	1.00	х							0).		0	
DIRECTOR (THRU 8/2020) (23) ANDREW SUNDQUIST	1.00	Λ						0.	U	+		0.	
DIRECTOR	1.00	Х						0.	0			0.	
(24) KEITH VESELKA	1.00									┿			
DIRECTOR		Х						0.	0).		0.	
										丁			
		-											
							L	115,917.	0).	11	,283.	
1b Subtotal								0.).		, <u>203.</u> 0.	
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								115,917.).	11	,283.	
Total number of individuals (including but n							o re			<u>•</u>		72031	
compensation from the organization				G. G.		,		, , , , , , , , , , , , , , , , , , , ,				1	
· · · · · · · · · · · · · · · · · · ·											,	Yes No	
3 Did the organization list any former officer,	director, trust	ee, ł	кеу е	empl	oye	e, or	hig	phest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual									. L	3	X	
4 For any individual listed on line 1a, is the su	•		•					•	•				
and related organizations greater than \$150	•		•								4	X	
5 Did any person listed on line 1a receive or a	•				•			•			_	v	
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e J f	or su	ıch r	oers	on .				<u>. </u>	5	X	
Complete this table for your five highest co	mnensated inc	lene	nder	nt cc	ntra	acto	rs th	hat received more than \$	100 000 of comper		on fron	 n	
the organization. Report compensation for										louin	011 11 011		
(A)								(B)			(C)		
Name and business	address	N	INC	3				Description of s	ervices	Co	mpens	sation	

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Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 (2020) WASHING
Part VIII Statement of Revenue

			Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
			Check if Schedule O Contains a response o	ir flote to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
े इ	1	a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues 1b					
Ē,		С	Fundraising events 1c	49,519.				
iffts ar A			Related organizations 1d					
s, G mila			Government grants (contributions) 1e					
ion Si			All other contributions, gifts, grants, and					
but			similar amounts not included above 1f	1,485,326.				
nti Octri		g	Noncash contributions included in lines 1a-1f 1g \$	24,769.				
a Su a D		h	Total. Add lines 1a-1f		1,534,845.			
				Business Code				
ė	2	а						
rvic e		b						
Se		С						
am eve		d						
Program Service Revenue		е						
P		f	All other program service revenue					
		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, interes					
			other similar amounts)	>	90,059.	90,059.		
	4		Income from investment of tax-exempt bond pr					
	5		Royalties					
			(i) Real	(ii) Personal				
			Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 1,095,521.					
		b	Less: cost or other basis					
nue			and sales expenses 7b 960,553.					
Revenue			Gain or (loss) 7c 134,968.		134,968.	124.060		
er R			Net gain or (loss)	>	134,966.	134,968.		
Othe	8	а	Gross income from fundraising events (not including \$ 49,519. of					
0								
			contributions reported on line 1c). See	285,075.				
		h	Part IV, line 18 8a Less: direct expenses 8b	80,290.				
			Net income or (loss) from fundraising events	<u> </u>	204,785.			204,785.
			Gross income from gaming activities. See					222,7230
		u	Part IV, line 19 9a					
		h	Less: direct expenses 9b	845.				
			Net income or (loss) from gaming activities	•	-845.			-845.
			Gross sales of inventory, less returns					
			and allowances 10a					
		b	Less: cost of goods sold 10b					
			Net income or (loss) from sales of inventory					
				Business Code				
sno	11	а						
ane		b						
sells eve		С						
Miscellaneous Revenue		d	All other revenue					
			Total. Add lines 11a-11d					
	12		Total revenue. See instructions		1,963,812.	225,027.	0.	203,940.

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 (C) Management and general expenses (**D**)
Fundraising Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 1,034,645. 1,034,645. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 127,200. 57,240. 38,160. 31,800. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 162,365. 110,754. 38,559. 13,052. Other salaries and wages 7 Pension plan accruals and contributions (include 4,592. 3,160. 1,083. 349. section 401(k) and 403(b) employer contributions) 5,799. 2,713. 23,087. 14,575. Other employee benefits 9 22,651. 13,262. 5,969. 3,420. 10 Payroll taxes Fees for services (nonemployees): Management Legal 10,406. 10,406. Accounting Lobbying Professional fundraising services. See Part IV, line 17 10,880. 10,880. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 3,000. 3,000. column (A) amount, list line 11g expenses on Sch O.) $6,\overline{678}$ 1,723. 11,407. 3,006. Advertising and promotion 12 19,560. 7,434. 10,207. 1,919. Office expenses 13 20,727. 18,145. 941. 1,641. Information technology 14 15 Royalties 15,436. 9.037. 4,068 2,331. 16 Occupancy 1,286. 753. 339. 194. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 5,933. 5,933. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 3,579. 3,579. Depreciation, depletion, and amortization 22 4,250. 2,488. 1,120. 642. 23 Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 4,058. 9,112. 5,054. DEVELOPMENT EXPENSES RECOGNITION EXPENSES 3,421. 3,331. 90. 2,404. 2,404. VOLUNTEER APPRECIATION С

Form 990 (2020)

63,232.

d

25

All other expenses

1,286,556.

2,926.

1,498,867.

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

2,926.

149,079.

Form 990 (2020)

Part X | Balance Sheet

Par	t X	Balance Sheet						
		Check if Schedule O contains a response or r	note to	any line	in this Part X			
						(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				329,998.	1	385,467.
	2	Savings and temporary cash investments				180,787.	2	206,313.
	3	Pledges and grants receivable, net			3			
	4	Accounts receivable, net	36,067.	4	31,025			
	5	Loans and other receivables from any current						
		trustee, key employee, creator or founder, su	bstantia	al contrib	outor, or 35%			
		controlled entity or family member of any of the			5			
	6	Loans and other receivables from other disqu						
		under section 4958(f)(1)), and persons describ	oed in s	ection 4	958(c)(3)(B)		6	
t2	7	Notes and loans receivable, net			7			
Assets	8	Inventories for sale or use					8	
₹	9	Prepaid expenses and deferred charges				2,000.	9	0.
	10a	Land, buildings, and equipment: cost or othe						
		basis. Complete Part VI of Schedule D	10	а	46,519.			
	b	Less: accumulated depreciation	39,429.	8,820.	10c	7,090. 8,418,231.		
	11	Investments - publicly traded securities		7,359,710.	11	8,418,231		
	12	Investments - other securities. See Part IV, lin		12				
	13	Investments - program-related. See Part IV, lin		13				
	14	Intangible assets			14			
	15	Other assets. See Part IV, line 11		- 04 F 000	15	0.040.406		
	16	Total assets. Add lines 1 through 15 (must e				7,917,382.	16	9,048,126.
	17	Accounts payable and accrued expenses				15,602.	17	14,469.
	18					117,718.	18	107,850. 66,350.
	19	Deferred revenue		77,900.	19	00,330		
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability. Comple					21	
Liabilities	22	Loans and other payables to any current or fo						
ij		trustee, key employee, creator or founder, su						
Liat	00	controlled entity or family member of any of the					22	
_	23	Secured mortgages and notes payable to unr		•			23 24	
	24 25	Unsecured notes and loans payable to unrela Other liabilities (including federal income tax,						
	25	parties, and other liabilities not included on lin						
		·		-		3,613,746.	25	3,936,151.
	26	of Schedule D Total liabilities. Add lines 17 through 25				3,824,966.	26	4,124,820.
	20	Organizations that follow FASB ASC 958, o				3702173001		1,121,020
es		and complete lines 27, 28, 32, and 33.	, ioon					
ا يا	27	Net assets without donor restrictions				399,300.	27	481,811.
Bala	28	Net assets with donor restrictions				3,693,116.	28	4,441,495.
ᅵᄝ		Organizations that do not follow FASB ASC						
- ₽		and complete lines 29 through 33.	,		. —			
ğ	29	Capital stock or trust principal, or current fun			29			
Sets	30	Paid-in or capital surplus, or land, building, or					30	
As	31	Retained earnings, endowment, accumulated					31	
Net Assets or Fund Balances	32	Total net assets or fund balances				4,092,416.	32	4,923,306.
-	33	Total liabilities and net assets/fund balances				7,917,382.	33	9,048,126.

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Pai	T 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	1,96	3,8	<u> 12.</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,49	8,8	67.			
3	Revenue less expenses. Subtract line 2 from line 1	3			45.			
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			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	4,92	3,3	06.			
Pai	t XII Financial Statements and Reporting	•						
	Check if Schedule O contains a response or note to any line in this Part XII				X			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C	D.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	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:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit						
	Act and OMB Circular A-133?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					
			Form	990	(2020)			

032012 12-23-20

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization WASHINGTON APPLE EDUCATION FOUNDATION 91-1638890 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2020 WASHINGTON APPLE EDUCATION FOUNDATION 91-1638890 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1222363.	1159928.	1522126.	1499463.	1563295.	6967175.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1222363.	1159928.	1522126.	1499463.	1563295.	6967175.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						6967175.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	1222363.	1159928.	1522126.	1499463.	1563295.	6967175.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	68,982.	75,142.	94,862.	96,603.	90,059.	425,648.
9	Net income from unrelated business	, , , , ,	- ,	- ,	,	,	
_	activities, whether or not the						
	business is regularly carried on	348.	120.	80.	40.	0.	588.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						7393411.
	Gross receipts from related activities,	etc. (see instruction	nns)			12 1	,422,402.
	First 5 years. If the Form 990 is for the	•	,				, ,
	organization, check this box and stor	-		•			ightharpoonup
Sec	ction C. Computation of Publi						
14	Public support percentage for 2020 (I	ine 6, column (f), d	ivided by line 11, c	column (f))		14	94.23 %
	Public support percentage from 2019					15	94.38 %
	33 1/3% support test - 2020. If the o					ore, check this box	
	stop here. The organization qualifies						
b	33 1/3% support test - 2019. If the o						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	-					
	meets the facts-and-circumstances te			-			▶ □
b	10% -facts-and-circumstances test	-	•		-		
	more, and if the organization meets the	-					
	organization meets the facts-and-circu				-		
18	Private foundation. If the organization						· · · · · · · · · · · · · · · · · · ·
			, 5, 700	, , , , 5		edule A (Form 990	

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						1
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						+
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						<u> </u>
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6	(4) 2010	(6) 2017	(0) 2010	(4) 2013	(6) 2020	(i) rotai
dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organization	on,
check this box and stop here						
Section C. Computation of Public						
15 Public support percentage for 2020 (li	ne 8, column (f), d	livided by line 13,	column (f))		15	
Public support percentage from 2019	Schedule A, Part	III, line 15			16	
Section D. Computation of Inves						
17 Investment income percentage for 20	20 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	
18 Investment income percentage from 2	2019 Schedule A,	Part III, line 17			18	
19a 33 1/3% support tests - 2020. If the	organization did r				33 1/3%, and line 1	
more than 33 1/3%, check this box an						▶□
b 33 1/3% support tests - 2019. If the line 18 is not more than 33 1/3%, chec	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	
20 Private foundation. If the organization						
-c rato rourrautioni, il tilo organization	. Gra Hot Officer a	~~~ OII III IO 17, 13	a, or roo, orrook tr			🔽 🗀

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
20		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
-		
9b		
9c		
00		
10a		
10b		

Pa	T V Type III Non-Functionally integrated 509(a)(3) Support	ing Organi	zations							
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.									
	All other Type III non-functionally integrated supporting organizations mu									
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)						
1	Net short-term capital gain	1								
2	Recoveries of prior-year distributions	2								
3	Other gross income (see instructions)	3								
4	Add lines 1 through 3.	4								
5	Depreciation and depletion	5								
6	Portion of operating expenses paid or incurred for production or									
	collection of gross income or for management, conservation, or									
	maintenance of property held for production of income (see instructions)	6								
7	Other expenses (see instructions)	7								
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8								
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)						
1	Aggregate fair market value of all non-exempt-use assets (see									
	instructions for short tax year or assets held for part of year):									
а	Average monthly value of securities	1a								
b	Average monthly cash balances	1b								
С	Fair market value of other non-exempt-use assets	1c								
d	Total (add lines 1a, 1b, and 1c)	1d								
	Discount claimed for blockage or other factors									
	(explain in detail in Part VI):									
2	Acquisition indebtedness applicable to non-exempt-use assets	2								
3	Subtract line 2 from line 1d.	3								
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,									
	see instructions).	4								
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5								
6	Multiply line 5 by 0.035.	6								
7	Recoveries of prior-year distributions	7								
8	Minimum Asset Amount (add line 7 to line 6)	8								
	ion C - Distributable Amount			Current Year						
1	Adjusted net income for prior year (from Section A, line 8, column A)	1								
2	Enter 0.85 of line 1.	2								
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3								
4	Enter greater of line 2 or line 3.	4								
5	Income tax imposed in prior year	5								
6	Distributable Amount. Subtract line 5 from line 4, unless subject to									
	emergency temporary reduction (see instructions).	6								
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	nization (see						

Schedule A (Form 990 or 990-EZ) 2020

instructions)

Part V Type III Non-Functionally Integrated	d 509(a)(3) Supporting Orgai	nizations _(continued)	<u> </u>
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accompli	ish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers	exempt purposes of supported		
organizations, in excess of income from activity		2	!
3 Administrative expenses paid to accomplish exempt p	ourposes of supported organizations	3	1
4 Amounts paid to acquire exempt-use assets		4	
5 Qualified set-aside amounts (prior IRS approval require	ed - <i>provide details in</i> Part VI)	5	;
6 Other distributions (describe in Part VI). See instruction	ons.	6	;
7 Total annual distributions. Add lines 1 through 6.		7	,
8 Distributions to attentive supported organizations to v	which the organization is responsive		
(provide details in Part VI). See instructions.		8	1
9 Distributable amount for 2020 from Section C, line 6		9	
Line 8 amount divided by line 9 amount		10	
	(i)	/ii\	(iii)

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reason-			
able cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D,			
line 7: \$			
Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if			
any. Subtract lines 3g and 4a from line 2. For result greater			
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2020

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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.

	ortion	ions. Complete Part III.		F.				
Name of organ		TON ADDIE EDUCATI	TOM HOUNDAMT		Employer identification number 91-1638890			
Part I-A	Complete if the era	TON APPLE EDUCAT: anization is exempt und	or section 501(a)	or is a section 527	91-1030090			
1 Provide a 2 Political of	description of the organiz	ation's direct and indirect politic ures gn activities	al campaign activities ir	n Part IV.	* \$			
Part I-B	Complete if the org	anization is exempt und	er section 501(c)(3	3).				
2 Enter the3 If the orga	amount of any excise tax anization incurred a section	incurred by the organization und incurred by organization manage n 4955 tax, did it file Form 4720	ers under section 4955 for this year?	>	* \$ Yes No			
	describe in Part IV.				[] 165 [] NO			
		anization is exempt und	er section 501(c),	except section 501	(c)(3).			
2 Enter the	amount of the filing organ	by the filing organization for sectization's funds contributed to other	her organizations for se	ction 527	· \$			
3 Total exe	mpt function expenditures	. Add lines 1 and 2. Enter here a	nd on Form 1120-POL,					
5 Enter the made pay contributi	names, addresses and em ments. For each organizations received that were pro	1120-POL for this year?	N) of all section 527 pol d from the filing organiza a separate political orga	itical organizations to wh ation's funds. Also enter inization, such as a sepal	ich the filing organization the amount of political			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fron filing organization's funds. If none, enter -0	contributions received and			

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

Schedule C (Form 990 or 990-EZ) 2020

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Schedule (C (Form 990 or 990-EZ) 2020	WASHIN	IGTON .	APPLE EDUCA	rion foundat	TION 91-1	L638890 Page 2
Part II-	A Complete if the org	anizatio	n is exen	npt under section	501(c)(3) and file	ed Form 5768 (ele	
A Check B Check	expenses, and shar	e of excess	s lobbying e	liated group (and list in expenditures).		group member's nam	ne, address, EIN,
b Check	Limi	ts on Lobb	ying Expe	•	visions арріу.	(a) Filing organization's totals	(b) Affiliated group totals
1a Tota	al lobbying expenditures to influ	uence publi	c opinion (g	grassroots lobbying)			
	al lobbying expenditures to influ						
c Tota	al lobbying expenditures (add li	nes 1a and	1b)				
d Othe	er exempt purpose expenditure	es					
e Tota	al exempt purpose expenditure	s (add lines	1c and 1d)			
f_Lobb	bying nontaxable amount. Ente	er the amou	int from the	e following table in both	columns.		
If the	e amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:		
Not	over \$500,000		20% of	the amount on line 1e.			
Over	r \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exce	ess over \$500,000.		
Over	r \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exce	ess over \$1,000,000.		
Over	r \$1,500,000 but not over \$17,	000,000	\$225,00	00 plus 5% of the exces	ss over \$1,500,000.		
Over	r \$17,000,000		\$1,000,	000.			
h Subt	ssroots nontaxable amount (en tract line 1g from line 1a. If zen	o or less, e	nter -0-				
	tract line 1f from line 1c. If zero						
-	ere is an amount other than ze						
repo	orting section 4911 tax for this	•					Yes No
	(Some organizations the	nat made a	section 50	eraging Period Under 01(h) election do not l ate instructions for lin	nave to complete all c	of the five columns b	elow.
		Lobb	ying Expe	nditures During 4-Yea	r Averaging Period	.	_
(or f	Calendar year fiscal year beginning in)	(a) 2	017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobb	bying nontaxable amount						
b Lobb	bying ceiling amount 1% of line 2a, column(e))						
c Tota	al lobbying expenditures						
	ssroots nontaxable amount						
	esroots ceiling amount % of line 2d, column (e))						

Schedule C (Form 990 or 990-EZ) 2020

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2020 WASHINGTON APPLE EDUCATION FOUNDATION 91-16388 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 e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(b)
	e lobbying activity.	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:			
а	Volunteers?	X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
С	Media advertisements?	X		484.
d	Mailings to members, legislators, or the public?	X		225.
	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		Х	010
g		X		919.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		792.
i	Other activities?	X		70.
	Total. Add lines 1c through 1i		37	2,490.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
	If "Yes," enter the amount of any tax incurred under section 4912			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(5), or sec	tion
. u.	501(c)(6).	00 1(0)(0	<i>5</i> ,, 0. 000	
	55.(5)(5).			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?			
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section			tion
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered			
	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 politic			
	expenses for which the section 527(f) tax was paid).			
а	Current year		2a	
	Carryover from last year		1 1	
С				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po			
	expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (See instructions)		5	
Par	t IV Supplemental Information			
Prov	ide 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 aı	nd 2 (See
instrı	uctions); and Part II-B, line 1. Also, complete this part for any additional information.			
PAI	RT II-B, LINE 1, LOBBYING ACTIVITIES:			
THI	E WASHINGTON APPLE EDUCATION FOUNDATION PARTICIPATED	IN LO	BBYIN	G
AC.	FIVITY FOR PASSAGE OF SENATE BILL 6032 DURING THE 20	20 LEG	SISLAT	ION
SES	SSION THAT RAN FROM JANUARY TO MARCH 2020. THE BILL	WOULD	CREAT	E A
SPI	CIALTY LICENSE PLATE THROUGH THE WASHINGTON STATE D	EPARTM	IENT O	F
LIC	CENSING WITH AN "APPLE" IMAGE. THE FOUNDATION WOULD	RECEIV	/E A	
		Schedu	le C (Form	990 or 990-EZ) 2020

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Schedule C (Form 990 or	r 990-E	Z) 2020	WASH	INGTO	N APPL	E EDUCATIO	N FOUNDA	TION	91-1	1638890	Page 4
Part IV Supplem	enta	Intor	mation	(continue	d)						
CONTRIBUTION	OF	\$28	FROM	EACH	APPLE	SPECTALTY	LICENSE	PLATE	SALE	AND	
001(11(1201101)		7_0				<u> </u>					
RENEWAL.											
									,	,	

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 Open to Public Inspection

Name of the organization

WASHINGTON APPLE EDUCATION FOUNDATION

Employer identification number 91-1638890

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 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	d 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 a	dvisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose co	onferring
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that appl <u>y).</u>	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of a	a historically important land area
	Protection of natural habitat	Preservation of a	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form of	f a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	,		
	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the c	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements if		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	rvation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easements during the year
•			(4)(D)(:)
8	Does each conservation easement reported on line 2(d) above		
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservati		
9	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	lote to the organization's infancial statemen	its that describes the
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 95		d balance sheet works
	of art, historical treasures, or other similar assets held for put	•	
	service, provide in Part XIII the text of the footnote to its final	, ,	•
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	,	,
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1	_	> \$
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2020

032051 12-01-20

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

	dule D (Form 990) 2020 WASHING 1	ollections of Art				r Simila	r Assets			ge ∠
3	Gottinasa)									
Ū	collection items (check all that apply):									
а										
		e e		nange progra	'''					
b	Scholarly research	e	Other							—
C	Preservation for future generations		la a 4 la a & 4 la a 4 la		-1		aa ia Dad	VIII		
4	Provide a description of the organization's co						ose in Part	XIII.		
5	During the year, did the organization solicit or		•	•				7 v		NI.
Par	to be sold to raise funds rather than to be ma							Yes		No
ı uı	reported an amount on Form 990, Part		ete ii trie organizatio	n answered	res on	F01111 99	u, Part IV, I	line 9, or		
10	Is the organization an agent, trustee, custodia		on, for contribution	or other see	oto not i	inaludad				
ıa								7 v		NI.
L	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a							」Yes		No
b	ii res, explain the arrangement in Part XIII a	ina complete the foil	owing table.					A may unt		
	Designing belongs					4-		Amount		
	Beginning balance					*				
	Additions during the year									
e	Distributions during the year									
0-	Ending balance							Yes	$\overline{}$	No
	Did the organization include an amount on For If "Yes," explain the arrangement in Part XIII.					шу г		_ 1es	H	NO
Par						10				
	Complete ii	(a) Current year	(b) Prior year	(c) Two years			years back	(e) Four	veare h	ack
10	Beginning of year balance	54,799.	48,824.		,681.	(u) IIIICC	45,669.	(e) i oui	43,3	
		02,700.	10,021.		, , , , ,		10,000.			
0	b Contributions c Net investment earnings gains and losses 6,254, 6,975, -1,857, 5,012, 2,275,								75	
4	Net investment earnings, gains, and losses Grants or scholarships	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,000.	_	,		-,			
u	Other expenditures for facilities		2,::::							
C										
	Administrative expenses									
'		61,053.	54,799.	48	,824.		50,681.		45,6	69
g 2	End of year balance [Provide the estimated percentage of the current percentage of the c		,		, •==-					-
	Board designated or quasi-endowment	18.9800	%	i) Heid as.						
	Permanent endowment > 36.5300	%								
	Term endowment 44.4900									
·	The percentages on lines 2a, 2b, and 2c shou									
За	Are there endowment funds not in the posses	•	tion that are held ar	nd administere	ed for th	ne organiz	ation			
- Ou	by:	olon or the organiza	non that are note a	ia dariii ilotore	JG 101 LI	io organiz		[·	Yes	No
	(i) Unrelated organizations							3a(i)		X
	(ii) Related organizations							3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	ed on Schedule R?					3b		
4	Describe in Part XIII the intended uses of the									
Par										
	Complete if the organization answered	I "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990,	Part X,	line 10.				
	Description of property	(a) Cost or ot		or other		ccumulat	ed	(d) Book	value	
	,	basis (investm	nent) basis	(other)		preciation		` ,		
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment		4	6,519.		39,4	29.	7	,09	0.
	Other					-				
Total	. Add lines 1a through 1e. (Column (d) must ed		K. column (B). line 1	Oc.)			. ▶	7	,09	0.

Schedule D (Form 990) 2020

Schedule D	(Form 990) 2020	WASHINGTON	APPLE EDUCATI	ON FOUNDATION	91-1638890 Page
Part VII		Other Securities.			· -:g-
	Complete if the org	ganization answered "Yes	on Form 990, Part IV, line	11b. See Form 990, Part X, line	12.
(a) Descrip		GOTY (including name of security)	(b) Book value		ost or end-of-year market value
(1) Financi	al derivatives				
(2) Closely	held equity interests	S			
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 99	0, Part X, col. (B) line 12.)			
Part VIII	Investments -	Program Related.			
	Complete if the org	ganization answered "Yes	on Form 990, Part IV, line	11c. See Form 990, Part X, line	13.
	(a) Description o	f investment	(b) Book value	(c) Method of valuation: C	ost or end-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
		0, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.				
	Complete if the org			11d. See Form 990, Part X, line	
		(a) Description		(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu	ımn (b) must equal F	orm 990, Part X, col. (B) lii	ne 15.)		
Part X	Other Liabilitie				
			" on Form 990, Part IV, line	11e or 11f. See Form 990, Part	
1.	(a) D	escription of liability			(b) Book value
-	deral income taxes	OD OFFI			2 225 1-1
	INDS HELD F	OR OTHERS			3,936,151
(3)					
(4)					

3,936,151. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2020

(6) (7) (8)

Pai	rt XI Reconciliation of Revenue per Audited Financial S	statements with r	revenue per me	turn.	
	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	2,375,243.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	365,945.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	56,366.		
е	Add lines 2a through 2d			2e	422,311.
3	Subtract line 2e from line 1			3	1,952,932.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	10,880.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	10,880.
5	Tatal various Add lines Q and 4s and			_	1 062 012
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	1,963,812.
	rt XII Reconciliation of Expenses per Audited Financial	12.) Statements With	Expenses per F	5 Return	
	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part I.	Statements With	Expenses per F	5 Return	1.
	rt XII Reconciliation of Expenses per Audited Financial	Statements With /, line 12a.	Expenses per F	5 Return	
Pa	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	Statements With /, line 12a.	Expenses per F		1.
Pa	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	Statements With /, line 12a.	Expenses per F		1.
1 2	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	Statements With /, line 12a.	Expenses per F		1.
1 2	Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	Statements With /, line 12a. 2a 2b	Expenses per F		1.
1 2 a b	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	Statements With /, line 12a. 2a 2b 2c	Expenses per F		1,544,353.
Pa 1 2 a b	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F		1,544,353. 56,366.
Pa 1 2 a b c d	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	56,366.	1	1,544,353.
Pa 1 2 a b c d e	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	56,366.	1 2e	1,544,353. 56,366.
Pa 1 2 a b c d e 3	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	Statements With /, line 12a. 2a 2b 2c 2d	56,366.	1 2e	1,544,353. 56,366.
1 2 a b c d e 3 4	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	Statements With /, line 12a. 2a 2b 2c 2d	56,366.	1 2e	56,366. 1,487,987.
1 2 a b c d e 3 4 a	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a	56,366. 10,880.	1 2e	56,366. 1,487,987.
1 2 a b c d e 3 4 a b c 5	Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	56,366. 10,880.	2e 3	56,366. 1,487,987.

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.

PART X, LINE 2:

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE; THEREFORE, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE FINANCIAL STATEMENTS. THE FOUNDATION HAS ALSO BEEN CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION UNDER SECTIONS 509(A)(1) AND 170(B)(1)(A)(VI) OF THE INTERNAL REVENUE CODE.

THE FOUNDATION RECEIVES CERTAIN REVENUES THAT ARE CONSIDERED UNRELATED BUSINESS TAXABLE INCOME. FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019, THE FOUNDATION RECOGNIZED NO INCOME TAX RELATED TO UNRELATED BUSINESS TAXABLE INCOME.

Schedule D (Form 990) 2020

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization							ntification number	
WASHINGTON APPLE EDUCATION FOUNDATION							91-1638890	
Fundraising Activities. required to complete this par	 Complete if the organization answer t. 	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not	
1 Indicate whether the organization rais	sed funds through any of the followin	g activ	ities.	Check all that apply.				
a Mail solicitations	e Solicita	tion of	non-g	overnment grants				
b Internet and email solicitations	s f Solicita	tion of	gover	nment grants				
c Phone solicitations	g Special	fundra	aising	events				
d In-person solicitations								
2 a Did the organization have a written of	or oral agreement with any individual	(includ	ling of	ficers, directors, trus	tees,	or		
key employees listed in Form 990, P						Yes		
b If "Yes," list the 10 highest paid indiv		ant to	agree	ments under which th	ne fur	ndraiser is to be	•	
compensated at least \$5,000 by the	organization.							
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
		contributions?			113	ted in coi. (i)		
		Yes	No	-				
			l					
Total			•					
List all states in which the organization or licensing.		contrib	utions	or has been notified	it is e	exempt from re	gistration	

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

Schedule G (Form 990 or 990-EZ) 2020

Schedule G (Form 990 or 990-EZ) 2020 WASHINGTON APPLE EDUCATION FOUNDATION 91-1638890 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events GOLF SCHOLARSHIP (add col. (a) through TOURNAMENT ALUNCHEON col. (c)) (event type) (total number) (event type) 180,625. 80,150. 73,819. 334,594. Gross receipts 3,750. 45,769 49,519. 2 Less: Contributions 180,625. 76,400. 28,050. Gross income (line 1 minus line 2) 285,075. 4 Cash prizes 10,794. 2,454. 26,580. 39,828. 5 Noncash prizes Direct Expenses 6 Rent/facility costs 607. 607. 7 Food and beverages 30,244. 30,244. 8 Entertainment 4,045. 3,709. 4,118. 11,872. Other direct expenses 82,551. 10 Direct expense summary. Add lines 4 through 9 in column (d) 202,524. 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: WA a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: **10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2020

Sch	edule G (Form 990 or 990-EZ) 2020 WASHINGTON APPLE EDUCATION FOUNDATION 91-1638890 Page 3
11	Does the organization conduct gaming activities with nonmembers? X Yes No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed
	to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
	The organization's facility
	l hoo oo
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ► JENNIFER WITHERBEE, EXECUTIVE DIRECTOR
	Address ► 2900 EUCLID AVENUE - WENATCHEE, WA 98801
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes X No
	If "Yes," enter the amount of gaming revenue received by the organization \$\bigs\tau\$ and the amount of gaming revenue retained by the third party \$\bigs\tau\$ and the amount of gaming revenue retained by the third party If "Yes," enter name and address of the third party:
	Name
	Address ▶
16	Gaming manager information:
	Name
	Gaming manager compensation > \$
	Description of services provided
	Director/officer Employee Independent contractor
17	Mandatory distributions:
	Is the organization required under state law to make charitable distributions from the gaming proceeds to
а	
	•
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
D -	organization's own exempt activities during the tax year > \$
Pa	Tt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Schedule G	G (Form 990 or 990-EZ)	WASHINGTON	APPLE	EDUCATION	FOUNDATION	91-1638890	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	mation (continued)					
		, ,					
							
_							

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **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

Open to Public Inspection

Schedule I (Form 990) 2020

Name of the organization							Employer identification number
WASHINGTO	91-1638890						
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 assis	stance, and the selecti	
criteria used to award the grants or ass	stance?						No
2 Describe in Part IV the organization's pr	ocedures for monit	oring the use of grant	funds in the United	l States.			
Part II Grants and Other Assistance to	Domestic Organiz	zations and Domestic	Governments. C	Complete if the org	anization answered "Y	es" on Form 990, Parl	t IV, line 21, for any
recipient that received more than	\$5,000. Part II can	be duplicated if additi	onal space is need	ed.			
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
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization 	-						>

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

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS - SCHOLARSHIPS ARE USED BY STUDENTS					
RAISED IN TREE FRUIT GROWING REGIONS OF					
WASHINGTON, IDAHO, AND OREGON. SCHOLARSHIPS MAY					
BE USED FOR BOOKS, TUITION, FOOD, ROOM AND BOARD.	315	1,034,645.			
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
SCHOLARSHIP RECIPEIENTS ARE REQUIRE	ED TO PRO	VIDE THEIR	R TERM TRAN	SCRIPTS TO	
THE ORGANIZATION DURING THEIR SCHOOL	LARSHIP A	WARD PERIC	D.		
PART III, COLUMN (A):					
(A) TYPE OF GRANT OR ASSISTANCE: SO	CHOLARSHI	PS - SCHOL	ARSHIPS AR	E USED BY	
STUDENTS RAISED IN TREE FRUIT GROW	ING REGIO	NS OF WASH	INGTON, ID	AHO, AND	
OREGON. SCHOLARSHIPS MAY BE USED	FOR BOOKS	, TUITION,	FOOD, ROO	M AND	
BOARD. THE AWARDS ARE ALLOCATED E	MA YITALIIC	ONGST THE	ACADEMIC T	ERMS OF	

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

WASHINGTON APPLE EDUCATION FOUNDATION

Employer identification number 91-1638890

FORM 990, PART VI, SECTION B, LINE 11B:

THE BOARD OF DIRECTORS IS PROVIDED A DRAFT OF THE FORM 990 FOR APPROVAL PRIOR TO ITS FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE FOUNDATION HAS A POLICY THAT ALL CONFLICTS OF INTEREST ARE TO BE BROUGHT TO THE ATTENTION OF THE BOARD OF DIRECTORS WHENEVER THEY OCCUR.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE COMMITTEE OF THE WASHINGTON APPLE EDUCATION FOUNDATION, EACH PERFORMS AN ANNUAL REVIEW OF THE EXECUTIVE DIRECTOR INCLUDING: DISCUSSION OF THE GOALS FROM THE PRIOR YEAR, ESTABLISHMENT OF GOALS FOR THE COMING YEAR, AND A REVIEW OF SALARIES FROM COMPARABLE ORGANIZATIONS. THE EXECUTIVE COMMITTEE DETERMINES ANNUALLY A RECOMMENDATION TO PRESENT TO THE BOARD OF DIRECTORS OF ANY SALARY ADJUSTMENTS.

PART VI, SECTION C, LINE 19: FORM 990,

THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE ON ITS WEBSITE AND THEIR CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST

FORM 990, PART XII, LINE 2(C) EXPLANATION:

THE FOUNDATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR

OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS. THE AUDIT

COMMITTEE IS CHARGED WITH RECOMMENDING AN INDEPENDENT ACCOUNTANT

THE BOARD OF DIRECTORS IS RESPONSIBLE FOR SELECTION. THE HOWEVER

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

Schedule O (Form 990 or 990-EZ) 2020