Department of the Treasury

## 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

▶ 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.

Open to Public

2022 A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, Check if applicable C Name of organization D Employer identification number Address change LEAGUE OF WOMEN VOTERS EDUCATION FUND Name 53-0239013 change Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 1233 20TH STREET, NW 202-263-1308 500 9,734,422. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended 20036-4542 WASHINGTON, DC H(a) Is this a group return Applica-tion pending F Name and address of principal officer: VIRGINIA KASE SOLOMON Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: ► WWW.LWV.ORG **H(c)** Group exemption number ▶ X Trust Other > L Year of formation: 1957 M State of legal domicile: DC K Form of organization: Corporation Association Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O **Activities & Governance** if the organization discontinued its operations or disposed of more than 25% of its net assets. 16 3 Number of voting members of the governing body (Part VI, line 1a) 3 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 50000 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0. **Current Year Prior Year** 5,519,979. 7,311,203. Contributions and grants (Part VIII, line 1h) 8 254,765. 183,432. Program service revenue (Part VIII, line 2g) 168,084. 147,997.Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 293,909. 274,739. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 6,217,567. 7,936,541. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 653,430. 957,256. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 2,224,469. 2,648,839. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Expenses 94,980. 16a Professional fundraising fees (Part IX, column (A), line 11e) 89,851. **b** Total fundraising expenses (Part IX, column (D), line 25) 3,154,980. 3,157,505. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 6,127,859. 6,853,451. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 89,708. 1,083,090. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 13,002,496. 12,664,352 Total assets (Part X, line 16)  $2,526,\overline{708}$ 2,400,466. 21 Total liabilities (Part X, line 26) 三年 10,475,788. 10,263,886 22 Net assets or fund balances. Subtract line 21 from line 20 ..... Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign VIRGINIA KASE SOLOMON, CHIEF EXECUTIVE OFFICER Here Type or print name and title PTIN Date Check Print/Type preparer's name Preparer's signature ELIZABETH W. HELLER 02/27/23 self-employed P00397829 Paid Firm's name RSM US LLP Firm's EIN = 42 - 0714325Preparer Firm's address ▶ 1250 H STREET, SUITE Use Only Phone no. 202-293-2200 WASHINGTON, DC 20005

No

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

#### Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Taxpayer identification number (TIN) Type or Name of exempt organization or other filer, see instructions. print LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 1233 20TH STREET, NW, 500 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 20036-4542 WASHINGTON, DC Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 8870 Form 990-T (trust other than above) 06 12 Form 990-T (corporation) VIRGINIA KASE SOLOMON The books are in the care of ► 1233 20TH STREET, NW, 500 - WASHINGTON, DC 20036-4542 Telephone No. ► 202-263-1308 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. MAY 15, 2023 \_\_\_\_, to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year or  $\underline{\hspace{0.5cm}}$  , and ending  $\underline{\hspace{0.5cm}}$  JUN  $\hspace{0.5cm}$  30 ,  $\hspace{0.5cm}$  2022 ► X tax year beginning JUL 1, 2021 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

rai	Statement of Frogram 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 LEAGUE OF WOMEN VOTERS EDUCATION FUND WORKS TO REGISTER VOTERS AND
	PROVIDE VOTERS WITH ELECTION INFORMATION THROUGH VOTER GUIDES AS WELL
	AS CANDIDATE FORUMS AND DEBATES.
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	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	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 \$2, 253, 463. including grants of \$15, 159. ) (Revenue \$)
	MISSION IMPACT: THE MISSION IMPACT FUNCTION INCLUDES ACTIVITIES THAT
	ARE DEVOTED TO INFORMING THE PUBLIC ABOUT VOTER REGISTRATION AND THE
	IMPORTANCE OF VOTING AND PROVIDING CANDIDATE INFORMATION.
	DIENCE CEE MIE NOTHTONNI DEMNIED NADDAMIJE AM COURDINE O
	PLEASE SEE THE ADDITIONAL DETAILED NARRATIVE AT SCHEDULE O.
41-	(Code: ) (Expenses \$ 1,197,422. including grants of \$ 839,343.) (Revenue \$ )
4b	(Code:) (Expenses \$1, 197, 422 including grants of \$839, 343) (Revenue \$) OUTCOME AND EVALUATION: THE OUTCOME AND EVALUATION FUNCTION IS
	COLLECTING AND ANALYZING DATA TO MEASURE OUR IMPACT.
	CODDICTING AND AMADIBING DATA TO MEADONE OUR IMPACT.
	PLEASE SEE THE ADDITIONAL DETAILED NARRATIVE AT SCHEDULE O.
4c	(Code:) (Expenses \$ 766 , 452 . including grants of \$ ) (Revenue \$ 183 , 432 . )
	COMMUNICATIONS: EXPENDITURES ARE USED TO MAINTAIN THE LEAGUE'S WEBSITE,
	PREPARE AND DISSEMINATE MATERIALS AND PUBLICATIONS, WHICH PROMOTE CIVIC
	AWARENESS AND RESPONSIBILITY, AND WHICH ADDRESS SELECTED ISSUES.
	SCHEDULE O PROVIDES ADDITIONAL DETAILED DESCRIPTION OF THE LEAGUE'S
	COMMUNICATIONS PROGRAM ACHIEVEMENTS.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 1,044,275 • including grants of \$ 2,754 • ) (Revenue \$ )
4e	Total program service expenses ► 5,261,612.
	Form <b>990</b> (2021)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_		37
_	during the tax year? If "Yes," complete Schedule C, Part II	4_		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	l _		- v
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		v	
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		<b>₩</b>
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		- v
_	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?			37
	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		37	
	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,		37	
	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			<b>₩</b>
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	۱.,		<b>₩</b>
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	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			X
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	_
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	
f	3			<b>₩</b>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			<b>₩</b>
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		v	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
O	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			
	, 30 0	111		x
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		125
15		45		X
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		125
10		16		x
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		125
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17	Х	
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	⊢'′	- 22	
10		18		x
10	1c and 8a? If "Yes," complete Schedule G, Part II	16		1
19	,	40		x
20-	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
20a		20a 20b		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	41	77	

Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 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 Х 23 Schedule J 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 Х Schedule K. If "No," go to line 25a 24a 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 Х 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 Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Х 26 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 ....... Х 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV ..... 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV ..... A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV ..... Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I ..... 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 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 3 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Description 
LEAGUE OF WOMEN VOTERS EDUCATION FUND Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No				
<b>2</b> a	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 (							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b						
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions	·			37				
			3a		X				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule (		3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		4-		X				
<b>h</b>	financial account in a foreign country (such as a bank account, securities account, or other financial at If "Yes," enter the name of the foreign country	count)?	4a						
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FRAR)							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		х				
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?								
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5b 5c		X				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
	any contributions that were not tax deductible as charitable contributions?	•	6a		Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contribution								
	were not tax deductible?		6b						
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv	vices provided to the payor?	7a		Х				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required							
	to file Form 8282?		7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file For		7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the							
0	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.		8						
9	a. Did the appropriate experientian make any toyoble distributions under partian 40660								
b	b. Did the annualization make a distribution to a dense dense design and size and si								
10	Section 501(c)(7) organizations. Enter:		9b						
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders	11a							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?		13a						
<b>L</b>	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b							
c	Enter the amount of reserves on hand	13c	1						
14a		•	14a		х				
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedul</i> -	- O	14b		T				
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?									
If "Yes," see the 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?									
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in a	any							
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17						
	If "Yes," complete Form 6069.								

Form 990 (2021) LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 Page
Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below 8b b

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
_	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			l
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 16			
	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.			
	J			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_		37
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			٠,,
_	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 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	37	X
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 appoint one or		37	
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		7.7	
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 reached at the			3,7
<u> </u>	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 Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
р	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Λ	
b	1 , , , ,	40-	v	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40	Х	
40	on 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		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	4=	v	
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40		v
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
800	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filled SEE SCHEDULE O	1 3		-1-
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	avaılal	oie
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)	_		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	VIRGINIA KASE SOLOMON - 202-263-1308			
	1233 20TH STREET, NW, 500, WASHINGTON, DC 20036-4542			

# 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization  (A)						Sale	(D) (E) (F)				
Name and title	(B) Average	(C) Position						Reportable	Reportable	Estimated	
Name and the	hours per					than o		compensation	compensation	amount of	
	week		officer and a director/trus					from	from related	other	
	(list any	ctor						the	organizations	compensation	
	hours for	or dire	au l			ted		organization	(W-2/1099-MISC/	from the	
	related	stee	truste		ao	pensa		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations	ıal tru	onal		ploye	com		1099-NEC)		and related	
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations	
(1) VIRGINIA KASE SOLOMON	20.00	=	=	0		Ξæ	4				
CHIEF EXECUTIVE OFFICER	20.00			х				148,497.	148,497.	27,032.	
(2) CECILIA CALVO	20.00									•	
CHIEF DEVELOPMENT OFFICER	20.00					Х		91,261.	91,261.	1,122.	
(3) SARAH COURTNEY	20.00										
CHIEF COMMUNICATIONS OFFICER	20.00					Х		72,537.	72,537.	13,194.	
(4) CELINA STEWART	20.00										
CHIEF COUNSEL	20.00					X		74,471.	74,471.	7,880.	
(5) KELLY MCFARLAND	20.00	-									
CHIEF OF STAFF	20.00					Х		76,895.	76,895.	864.	
(6) JEANETTE SENECAL	20.00	-						64 006	64 006	04 500	
SENIOR DIRECTOR, MISSION I	20.00					Х		64,836.	64,836.	24,590.	
(7) ELLEN HOBBY	20.00	-		х				47 722	47 722	6 240	
(8) DEBORAH TURNER	7.50			Λ				47,722.	47,722.	6,348.	
CHAIR	7.50	Х		Х				0.	0.	0.	
(9) JESSICA LOWE-MINOR	7.50	72						0.	0.	<u></u>	
VICE CHAIR	7.50	х		Х				0.	0.	0.	
(10) JESSICA ROHLOFF	7.50							•	•		
SECRETARY	7.50	х		х				0.	0.	0.	
(11) LEAH EDWARDS	7.50							-	-		
TREASURER	7.50	Х		Х				0.	0.	0.	
(12) LIZ BANDER	7.50										
DIRECTOR	7.50	Х						0.	0.	0.	
(13) MELISSA BREACH	7.50										
DIRECTOR	7.50	Х						0.	0.	0.	
(14) MELISSA CURRENCE	7.50	1								_	
DIRECTOR	7.50	Х						0.	0.	0.	
(15) JOAN HUNAULT	7.50							_	_	_	
DIRECTOR		Х						0.	0.	0.	
(16) SANIA IRWIN	7.50									_	
DIRECTOR	7.50	Х						0.	0.	0.	
(17) ALLYSON KAPIN	7.50	٠,							_	_	
DIRECTOR	0.00	Х						0.	0.	<b>0.</b>	

Form **990** (2021)

Section A. Officers, Directors, Trus		ploy	ees,			ghes	st C		,				
(A)	(B)	(C) Position			(D)		(E)		(F)				
Name and title	Average hours per			check	more	than o		Reportable compensation	•	Reportable		timate nount	
	week					is both or/trus		from	compensation from related			other	JI
	(list any	ctor						the	organization			pensa	tion
	hours for	r dire				peq		organization	(W-2/1099-MIS	SC/	fr	om th	е
	related	stee o	trustee			ensa		(W-2/1099-MISC/	1099-NEC)	<i>,</i>	_	anizat	
	organizations below	al tru	onal t		loyee	S S		1099-NEC)				d relat	
	line)	Individual trustee or director	Institutional t	Officer	Key employee	Highest compensated employee	Former				orga	anizati	ons
(18) ALLISON RIGGS	7.50	드	트	10	포	工品	Œ						
DIRECTOR	7.50	Х						0.		0.			0.
(19) NAN SHUKER	7.50												
DIRECTOR	0.00	Х						0.		0.			0.
(20) LALI WATT	7.50												
DIRECTOR	7.50	Х						0.		0.			0.
(21) TONI ZIMMER	7.50												
DIRECTOR	7.50	Х						0.		0.			0.
(22) TERESA ACUNA	7.50												
DIRECTOR	0.00	Х						0.		0.			0.
(23) KIMBERLEY FRASER	7.50												
DIRECTOR	0.00	Х						0.		0.			0.
				_		-				$\longrightarrow$			
		-											
			$\vdash$	$\vdash$						$\rightarrow$			
		1											
1b Subtotal							<b></b>	576,219.	576,2		8	1,0	30.
c Total from continuation sheets to Part VI							▶	0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	576,219.	576,2	19.	8:	1,0	30 <b>.</b>
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed ab	oove	e) wh	o r	eceived more than \$100,	000 of reportable	е			_
compensation from the organization											I	1	0
										ſ		Yes	No
3 Did the organization list any <b>former</b> officer,	•		•	•	•		•		•				37
line 1a? If "Yes," complete Schedule J for s										}	3		X
4 For any individual listed on line 1a, is the su	•							•	•			v	
and related organizations greater than \$150										}	4	Х	
5 Did any person listed on line 1a receive or a	•				•			· ·	iuai for services	- 1	_		Х
rendered to the organization? If "Yes." com Section B. Independent Contractors	<u>iplete Schedul</u>	e J f	or si	uch į	oers	son .					5		
Complete this table for your five highest co	mpensated inc	dene	nde	nt co	ontr	acto	rs t	hat received more than \$	100 000 of com	 nensat	ion fro	m	
the organization. Report compensation for	=	-								Jonoas		,,,,	
(A)								(B)			(C		
Name and business								Description of s	ervices	С	ompei	nsatio	n
LOOKTHINK, 1300 19TH ST N	W SUITE	6	30	,				COMMC CIIDDOD	n		9.0	5 0	13
WASHINGTON, DC 20036 RWT PRODUCTION LLC								COMMS SUPPOR!	ı	<b>—</b>	09	5,9	±J.
KMI EKODOCIION TIC	ר מזז י	00	2					DDTNMTNC AND	DOCUME		26	0 0	07

(A)	(B)	(C)
Name and business address	Description of services	Compensation
LOOKTHINK, 1300 19TH ST NW SUITE 630,		
WASHINGTON, DC 20036	COMMS SUPPORT	895,943.
RWT PRODUCTION LLC		
8932 HUNT LANE, ANNANDALE, VA 22003	PRINTING AND POSTAGE	268,007.
AVALON CONSULTING GROUP	FUNDRAISING	
600 NORTH PARK CENTER, ATLANTA, GA 30328	CONSULTING	178,400.
ALLEGIANCE FUNDRAISING, ALLEGIANCE	FUNDRAISING	
FUNDRAISING 3064 49TH ST S, FARGO, ND	CONSULTING	165,525.
2 Total number of independent contractors (including but not limited to those lister	d above) who received more than	

4

\$100,000 of compensation from the organization

		Check if Schedule O	contains	s a response o	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues							
9 5		Fundraising events							
fts,		Related organizations							
ija Bij					35,000.				
ons,		Government grants (contri			33,000.				
utio	т	All other contributions, gifts,		1 1	7 276 203				
ë	-	similar amounts not included			7,276,203.				
o d	_	Noncash contributions included in			17,250.	7 211 202			
Oa	n	Total. Add lines 1a-1f			Business Code	7,311,203.			
	•	ITODNOTNO DDD		900099	193 432	102 /22			
ice	2 a				900099	183,432.	183,432.		
er re	b	-							
n S	С								
Jrar Rev	d								
Program Service Revenue	е								
Δ.		All other program service							
$\rightarrow$		Total. Add lines 2a-2f				183,432.			
	3	Investment income (include							
		other similar amounts)				131,588.			131,588.
	4	Income from investment of							
	5	Royalties	. <u></u>						
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a	165,266.					
	b	Less: rental expenses	6b	0.					
	С	Rental income or (loss)	6с	165,266.					
	d	Net rental income or (loss)	$\overline{}$		<b>&gt;</b>	165,266.			165,266.
	7 a	Gross amount from sales of	<b>⊢</b>	i) Securities	(ii) Other				
		assets other than inventory	7a	1,814,290.					
	b	Less: cost or other basis							
ne		and sales expenses							
Revenue	С	Gain or (loss)	7c	16,409.					
	d	Net gain or (loss)				16,409.			16,409.
her	8 a	Gross income from fundraising	ng event	s (not					
ᅙ		including \$		of					
		contributions reported on	line 1c)	. See					
		Part IV, line 18							
	b	Less: direct expenses		8b					
	С	Net income or (loss) from	fundrais	sing events	<b></b>				
	9 a	Gross income from gamin	•	I .					
		Part IV, line 19		9a					
	b	Less: direct expenses		9b					
	С	Net income or (loss) from	gaming	activities	<b></b>				
	10 a	Gross sales of inventory, I	ess retu	urns					
		and allowances		10a					
	b	Less: cost of goods sold		10b					
	С	Net income or (loss) from	sales of	f inventory	<b>&gt;</b>				
, Τ					Business Code				
ño e	11 a	MISCELLANEOUS			900099	128,643.			128,643.
ane	b								
Miscellaneous Revenue	С								
Aisc	d	All other revenue		<del>_</del>					
2	е	Total. Add lines 11a-11d			<b></b>	128,643.			
	12	Total revenue. See instruction				7,936,541.	183,432.	0.	441,906.

Secu	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 respon	se or note to any line in			X						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21	957,256.	957,256.								
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22										
3	Grants and other assistance to foreign										
	organizations, foreign governments, and foreign										
	individuals. See Part IV, lines 15 and 16										
4	Benefits paid to or for members										
5	Compensation of current officers, directors,	24.2 22.2	454 504	22 254	40.000						
	trustees, and key employees	212,909.	154,581.	39,351.	18,977.						
6	Compensation not included above to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	2 000 225	1 400 401	246 226	100 500						
7	Other salaries and wages	2,009,235.	1,482,481.	346,226.	180,528.						
8	Pension plan accruals and contributions (include	124 245	121 010	2 412	15 720						
_	section 401(k) and 403(b) employer contributions)	134,345. 106,741.	121,019. 62,704.	-2,412. 35,423.	15,738. 8,614.						
9	Other employee benefits	185,609.	229,038.	-72,631 <b>.</b>	29,202.						
10	Payroll taxes	103,009.	229,030.	- /2,031.	29,202.						
11	Fees for services (nonemployees):										
a	Management	31,217.	24,064.	/ 131	3 022						
D	Legal	28,134.	21,810.	4,131. 3,652.	3,022.						
ر. د	Accounting	20,134.	21,010.	3,032.	2,012.						
u	Lobbying Professional fundraising services. See Part IV, line 17	89,851.			89,851.						
f	Investment management fees	48,681.		48,681.	03,0321						
g		10,0010		10,0010							
9	column (A), amount, list line 11g expenses on Sch O.)	1,527,055.	1,256,967.	11,259.	258,829.						
12	Advertising and promotion	115 205	00 01 5	T 000							
13	Office expenses	117,387.	29,917.	7,020.	80,450.						
14	Information technology	197,286.	178,847.	10,648.	7,791.						
15	Royalties	202 612	202 720	E1 117	20 757						
16	Occupancy	392,613. 7,115.	302,739. 4,527.	51,117. 2,564.	38,757.						
17	Travel	7,113.	4,54/.	4,304.							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials										
40	Conferences, conventions, and meetings	7,500.	7,500.								
19 20		7,300•	7,300								
20 21	Interest Payments to affiliates										
22	Depreciation, depletion, and amortization	64,055.	59,279.	2,758.	2,018.						
23	Insurance	27,945.	21,939.	3,468.	2,538.						
24	Other expenses. Itemize expenses not covered 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.)	·	·	·	,						
а	PRINTING AND POSTAGE	608,924.	317,846.		291,078.						
b	MISCELLANEOUS	99,593.	29,098.	52,746.	17,749.						
c			•		•						
d											
е	All other expenses										
25	Total functional expenses. Add lines 1 through 24e	6,853,451.	5,261,612.	544,001.	1,047,838.						
26	<b>Joint costs</b> . Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.										
	Check here X if following SOP 98-2 (ASC 958-720)	422,703.	131,625.	0.	291,078.						

Form 990 (2021)
Part X Balance Sheet

Pai	τx	Balance Sneet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments			4,459,798.	2	4,898,973.
	3	Pledges and grants receivable, net			62,204.	3	51,575.
	4	Accounts receivable, net	179,897.	4	879,839.		
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
		controlled entity or family member of any of the	se pers	ons		5	
	6	Loans and other receivables from other disqual	ified per	sons (as defined			
		under section 4958(f)(1)), and persons describe		6			
υ	7	Notes and loans receivable, net			7	0.	
Assets	8	Inventories for sale or use				8	
ĕ	9	5			61,691.	9	35,807.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	362,074. 339,363.			
	b		86,766.	10c	22,711. 6,775,447.		
	11	Investments - publicly traded securities	8,152,140.	11	6,775,447.		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	ual line 3	3)	13,002,496.	16	12,664,352.
	17	Accounts payable and accrued expenses			707,156.	17	898,029.
	18	Grants payable	569,573.	18	552,128.		
	19	Deferred revenue		103,062.	19	94,400.	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or form					
Ě		trustee, key employee, creator or founder, subs		T I			
Liabilities		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X	1 146 010		055 000
		of Schedule D			1,146,917.	25	855,909.
	26			, चर	2,526,708.	26	2,400,466.
S		Organizations that follow FASB ASC 958, che	eck her	e ▶ [X]			
če		and complete lines 27, 28, 32, and 33.			0 400 707		0 255 020
alar	27	Net assets without donor restrictions	8,408,727.	27	8,355,830.		
Ä	28	Net assets with donor restrictions			2,067,061.	28	1,908,056.
Ĕ		Organizations that do not follow FASB ASC 9	958, che	eck here 🕨 📖			
Ĕ		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or e				30	
Ϋ́	31	Retained earnings, endowment, accumulated in			10 475 700	31	10 262 006
Ž	32	Total net assets or fund balances			10,475,788.	32	10,263,886.
	33	Total liabilities and net assets/fund balances			13,002,496.	33	12,664,352.

Form **990** (2021)

Pa	T XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,93				
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	,85	3,4	51.		
3	Revenue less expenses. Subtract line 2 from line 1	3		.,08				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))							
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	10	,26	3,8	86.		
Pa	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 on Schedule	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х		
	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:							
	Separate basis X 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 Sch							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	it					
	Act and OMB Circular A-133?	-		За		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ed audi	it					
	available explain why an Cabadula O and describe any stone taken to undergo such audite			26				

Form **990** (2021)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **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

2021

Open to Public Inspection

**Employer identification number** Name of the organization LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 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).) 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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 your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Pa	(Complete only if you checked fails to qualify under the tests	d the box on line 5	, 7, or 8 of Part I o	r if the organization			-
Sec	ction A. Public Support		•	,			
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	(4,7 = 3 + 1	(2) 20:0	(5) = 5 : 5	(4,) = 0 = 0	(6) 262 :	(.,
	membership fees received. (Do not						
	include any "unusual grants.")	2586745.	3341315.	5519516.	5519979.	7311203.	24278758.
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	2586745.	3341315.	5519516.	5519979.	7311203.	24278758.
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)						1214208.
	Public support. Subtract line 5 from line 4.						23064550.
	ction B. Total Support	Г		T	Т	T	T
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	2586745.	3341315.	5519516.	5519979.	7311203.	24278758.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	262 100	257 254	200 246	212 565	206 054	1220100
	and income from similar sources	262,190.	257,254.	208,246.	313,565.	296,854.	1338109.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						<del> </del>
10	Other income. Do not include gain						
	or loss from the sale of capital	21 225	93,666.		149,403.	120 642	393,037.
	assets (Explain in Part VI.)	21,325.	93,000.		149,403.	120,043.	26009904.
	<b>Total support.</b> Add lines 7 through 10	ete (eee in sture it	, no)			10	733,064.
	Gross receipts from related activities,			fourth or fifth toy			133,004.
13	First 5 years. If the Form 990 is for the	· ·		•		( )( )	▶□
Sec	organization, check this box and stopetion C. Computation of Publi				•••••	•••••	
	Public support percentage for 2021 (I			column (f))		14	88.68 %
	Public support percentage from 2020					15	88.13 %
	33 1/3% support test - 2021. If the						-
.00	stop here. The organization qualifies				14 13 00 17070 01 111		▶ 5
h	33 1/3% support test - 2020. If the		-				
~	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	-					
	meets the facts-and-circumstances te			-		viriow and organia	▶ □
b	10% -facts-and-circumstances test	-					
_	more and if the organization mosts th						

organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(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 per-						
	formed, 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						
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						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	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 on 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 the	e organization's fir	rst, second, third, f	fourth, or fifth tax y	year as a section 5	01(c)(3) organization	on,
_			-				<b>&gt;</b>
	ction C. Computation of Publi					<del></del>	
	Public support percentage for 2021 (li			column (f))		15	%
	Public support percentage from 2020					16	%
	ction D. Computation of Inves					T .= I	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2					0.1/00/	%
19a	33 1/3% support tests - 2021. If the						/ is not
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19a	a, or 19b, check th	ns box and see ins	tructions	▶Ш

#### 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.
- 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")? |f "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?
- 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 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.
- Did one or more disqualified persons (as defined on 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 on 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
1		
0		
2		
0-		
3a		
3b		
_		
3c		
4a		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
9a		
9b		
9с		
10a		
.50		
10b		
IUU		

Par	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations	-		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one	or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	ers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one suppor organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations	•		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2021

instructions).

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
_3_	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
c	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i_	Carryover from 2016 not applied (see instructions)			
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2017			
b	Excess from 2018			
С	Excess from 2019			
d	Excess from 2020			
	Excess from 2021			

Schedule A (Form 990) 2021

132028 01-04-22 Schedule A (Form 990) 2021

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

53-0239013

2021

Name of the organization Employer identification number

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ > \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

# LEAGUE OF WOMEN VOTERS EDUCATION FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	on
1		\$ 500,000.  Person X Payroll Noncash (Complete Part II for noncash contributions)	ıs.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	on
2		\$ 500,000.  Person X Payroll Noncash (Complete Part II for noncash contributions)	ıs.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	on
3		\$ 400,000.  Person X Payroll Noncash (Complete Part II for noncash contributions)	ıs.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contributions	ion
4		Person X Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	on
5		\$ 175,000.  Person X Payroll Noncash (Complete Part II for noncash contributions)	ıs.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	on
6		\$ 150,000.  Person X Payroll Noncash (Complete Part II for noncash contributions)	ıs.)

# LEAGUE OF WOMEN VOTERS EDUCATION FUND

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for

# LEAGUE OF WOMEN VOTERS EDUCATION FUND

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

EAGUE	E OF WOMEN VOTERS EDUCA	TION FUND		53-0239013		
Part III	Exclusively religious, charitable, etc., contribu	tions to organizations describe	ed in section 5	01(c)(7), (8), or (10) that total more than \$1,000 for the year		
	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	a) through (e) and the following	line entry. For o	organizations		
	Use duplicate copies of Part III if additional	space is needed	ooo or less for	the year. (Enter this into, once.)		
(a) No.	ose duplicate copies of Fart in It additional	Space is needed.				
(a) No. from	(b) Purpose of gift	(c) Use of gift	t	(d) Description of how gift is held		
Part I	.,					
-		(a) Tuescafes	:	l .		
		(e) Transfer	or girt			
			_			
-	Transferee's name, address, a	ind ZIP + 4	R	Relationship of transferor to transferee		
		_				
(a) No. from						
from Part I	(b) Purpose of gift	(c) Use of gift	t	(d) Description of how gift is held		
Parti		+				
		-				
		(e) Transfer	of gift			
	Transferee's name, address, a	nd ZIP + 4	В	Relationship of transferor to transferee		
(=) N =				T		
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
Part I	(5) I dipose oi giit	(0) 000 01 gill	•	(a) Decomption of now gire to note		
-		(a) Transfer	of wift	L		
		(e) Transfer	or girt			
				Delationalsia of transferred to transferre		
-	Transferee's name, address, a	nd ZIP + 4	R	Relationship of transferor to transferee		
(a) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	t	(d) Description of how gift is held		
i ai t i						
	-					
L						
		(e) Transfer	of gift			
	Transferee's name, address, a	nd ZIP + 4	R	Relationship of transferor to transferee		
ŀ			•			
		-				
		-				

## **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 Inspection

Name of the organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

**Employer identification number** 53-0239013

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		is or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		183
2	Aggregate value of contributions to (during year)		144,856.
3	Aggregate value of grants from (during year)		162,302.
4	Aggregate value at end of year		552,128.
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's e	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can b	oe used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpos	•
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990	0, Part 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, recreat	tion or education) Preservation	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the for	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		I I
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by t	the 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 peri	iodic monitoring, inspection, handling o	of
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	handling of violations, and enforcing co	onservation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, handle	lling of violations, and enforcing conser	vation easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	-	
	balance sheet, and include, if applicable, the text of the footness.	ote to the organization's financial state	ments that describes the
Pai	organization's accounting for conservation easements.  † III Organizations Maintaining Collections of	Art Historical Treasures or 0	Other Similar Assets
· u	Complete if the organization answered "Yes" on Form		other chimar Accets.
	If the organization elected, as permitted under FASB ASC 958		t and balance sheet works
	of art, historical treasures, or other similar assets held for pub	•	
	service, provide in Part XIII the text of the footnote to its finan	,	'
h	If the organization elected, as permitted under FASB ASC 958		
-	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	oxination, cadeation, or recearer in ra	introducted of public delivines,
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
			<b>.</b> .
2	If the organization received or held works of art, historical trea		
_	the following amounts required to be reported under FASB AS		g, p. 01.00
а	Revenue included on Form 990, Part VIII, line 1	_	<b>&gt;</b> \$
	Assets included in Form 990, Part X		

362,074.

Schedule D (Form 990) 2021

339,363.

e Other

Leasehold improvements

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

d Equipment

Part VII	Investments -	<b>Other Securit</b>

Part VII	Investments - Other Securities.  Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Descrip	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financia	al derivatives			
	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	(a) [	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	ımn (b) must equal Form 990, Part X, col. (B) line	15)	<b>•</b>	
Part X	Other Liabilities.	70.)		
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1.	(a) Description of liability			(b) Book value
	deral income taxes			
	JE TO LWVUS			490,871.
	FERRED RENT			108,714.
	FERRED LEASEHOLD IMPROVE	MENTS		32,374.
	CRUED SUBLEASE LOSS			223,950.
(6)				,
(7)				
(8)				
(9)				
•	man (h) mayot agual F 000 P- 1 V 1 (P) "	05.)		855,909.
	<i>ımn (b) must equal Form 990, Part X, col. (B) line</i> r for uncertain tax positions. In Part XIII, provide			
	ation's liability for uncertain tax positions under			

Sche	dule D (Form 990) 2021 LEAGUE OF WOMEN VOTERS	EDUCATION FUND	53-02390	13 Page
Par	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenue pe	r Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	<u>)                                    </u>	5	

| Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

	Complete if the organization answered Tes of Form 336, Fart IV, line 12a.			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		
120	# YIII Supplemental Intermetion			

| Part XIII | Supplemental Information.

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

#### PART V, LINE 4:

LEAGUE OF WOMEN VOTERS HAS A POLICY OF APPROPRIATING FOR DISTRIBUTION EACH YEAR NO MORE THAN 10% AND NO LESS THAN 5% OF ITS ENDOWMENT FUND'S AVERAGE FAIR VALUE FROM THE TRAILING THREE YEARS TO BE DISTRIBUTED ANNUALLY. ANNUAL EARNINGS OF THE ENDOWMENT FUND IN EXCESS OF 10% WILL BE REINVESTED TO ALLOW FOR THE FUND'S GROWTH. IN ESTABLISHING THIS POLICY, LEAGUE OF WOMEN VOTERS CONSIDERED THE LONG-TERM EXPECTED RETURN ON ITS ENDOWMENT. THIS IS CONSISTENT WITH LEAGUE OF WOMEN VOTERS' OBJECTIVE TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS HELD IN PERPETUITY OR FOR A SPECIFIED TERM AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH NEW GIFTS AND INVESTMENT RETURN.

Schedule D (Form 990) 2021

Schedule	D (Form 990) 20	021	LEAGU	E OF	WOMEN	VOTERS	EDUCATION	FUND	53-0239013	Page 5
Part XI	III   Supplem	ental Inforn	nation <sub>(co</sub>	ontinued	)					

# SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

#### **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

2021

Open to Public Inspection

Name of the organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Employer identification number 53-0239013

Part I Fundraising Activities required to complete this par	Complete if the organization answett.	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
<ul> <li>1 Indicate whether the organization rais a X Mail solicitations</li> <li>b X Internet and email solicitations</li> <li>c X Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, P</li> <li>b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the</li> </ul>	e Solicitar f Solicitar g Special  or oral agreement with any individual cart VII) or entity in connection with providuals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover aising ding of onal fu	overnment grants nment grants events fficers, directors, trus undraising services?	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	ustody itrol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
MARKETEAM AGENCY - 600 NORTH	CONCUT TING	Yes	No	710 021	20, 400	600 631
PARK CENTER, SUITE 400 1200	CONSULTING		Х	710,031.	29,400.	680,631.
WEALTHENGINE, INC P.O. BOX 775981, CHICAGO, IL	CONSULTING		х	449,928.	18,630.	431,298.
Total  3 List all states in which the organization or licensing.  AL, AK, AZ, AR, CA, CO, CT,						
MT, NE, NV, NH, NJ, NM, NY,						
DC	NC, ND, OH, OK, OK, FA, I	ΛΙ, δ	, c	D, IN, IA, UI	, VI, VA, WA,	WV,WI,WI
<u>DC</u>						

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 (add col. (a) through col. (c)) (event type) (event type) (total number) 1 Gross receipts 2 Less: Contributions **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs ..... 7 Food and beverages 8 Entertainment 9 Other direct expenses ..... 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III 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 (c) Other gaming (a) Bingo 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: 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) 2021 LEAGUE OF WOMEN VOTERS EDUCATION FUN	ID 53-0239013 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity for	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	<u>13a</u> %
<b>b</b> An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books at	nd records:
Name	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming reven	nue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and	I the amount
of gaming revenue retained by the third party  \$\bigs\\$	
c 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:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations of	
organization's own exempt activities during the tax year > \$	
<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (ii 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	i) and (v); and Part III, lines 9, 9b, 10b,
13b, 13c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FU	NDRAISERS:
(I) NAME OF FUNDRAISER: MARKETEAM AGENCY	
(I) ADDRESS OF FUNDRAISER:	
600 NORTH PARK CENTER, SUITE 400 1200 ABERNATHY RD NE, A	TLANTA, GA 30328
OU TOTAL THE CHILD, BOLL TOU LOU IDDITINITIES IN HE, H	
(	
(I) NAME OF FUNDRAISER: WEALTHENGINE, INC.	
(I) ADDRESS OF FUNDRAISER. P.O. BOX 775981 CHICAGO II.	60677

132083 10-21-21 Schedule G (Form 990) 2021

Schedule G	(Form 990)	LEAGUE	OF	WOMEN	VOTERS	EDUCATION	FUND	53-0239013	Page 4
Part IV	(Form 990) Supplemental Infor	mation <sub>(cont</sub>	inued)	)					

#### **SCHEDULE I** (Form 990)

### **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.

Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

LEAGUE OF WOMEN VOTERS EDUCATION FUND

**Employer identification number** 

53-0239013 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 1 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) LWV OF ALABAMA 1321 DAUPHIN ST 23-7058948 501(C)(3) 8,500. 0 ELECTION SERVICES MOBILE, AL 36604 LWV OF ALABAMA EDUCATION FUND 660 EAST LN AUBURN, AL 36830 63-0870006 501(C)(3) 11,500 0. ELECTION SERVICES LWV OF ARIZONA 1934 E. CAMELBACK RD. #120 BOX 277 PHOENIX, AZ 85016 74-2783709 501(C)(4) 56,500 0. ELECTION SERVICES LWV OF BOSTON CHARTTABLE TRUST PO BOX 180654 BOSTON MA 02118 04-2713460 501(C)(3) 10 000 0. ELECTION SERVICES LWV OF CALIFORNIA 1107 9TH ST STE 300 501(C)(4) SACRAMENTO CA 95814 94-1506251 15 450 0. ELECTION SERVICES LWV OF CALIFORNIA EDUCATION FUND 921 11TH ST SUITE 700 SACRAMENTO, CA 95814 68-0061260 501(C)(3) 17 250 0 ELECTION SERVICES 20. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

Schedule I (Form 990) 2021

(a) Name and address of	/b) =INI	(a) IDC continu	(d) Amount of	(a) Amount of	(f) Mothod of	(a) Description of	(h) Durages of great
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WV OF FLORIDA							
L001 NORTH ORANGE AVE							
DRLANDO, FL 32801	59-0905672	501(C)(4)	18,500.	0.			ELECTION SERVICES
·			·				
LWV OF GEORGIA							
300 JOHNSON FERRY RD. NE SUITE B							
ATLANTA, GA 30342	58-0600853	501(C)(4)	28,000.	0.			ELECTION SERVICES
LWV OF KENTUCKY							
115 S. EWING AVE							
LOUISVILLE, KY 40206	31-1096216	501(C)(3)	8,500.	0.			ELECTION SERVICES
LILL OF MATHE EDUCATION BUND							
LWV OF MAINE EDUCATION FUND							
15 CASCO STREET	01-6020634	E01/G)/3)	17 200	0.			ELECTION SERVICES
PORTLAND, ME 04101	01-6020634	501(C)(3)	17,200.	0.			ELECTION SERVICES
LWV OF MICHIGAN EDUCATION FUND							
600 W SAINT JOSEPH ST STE 3G							
LANSING, MI 48933	05-0592001	501(C)(3)	49,375.	0.			ELECTION SERVICES
			13,676.	•			
LWV OF MINNESOTA							
550 RICE ST STE 201							
SAINT PAUL, MN 55103	36-3300249	501(C)(3)	14,875.	0.			ELECTION SERVICES
LWV OF MISSOURI EDUCATION FUND							
8706 MANCHESTER RD SUITE 104							
ST. LOUIS, MO 63144	43-1344654	501(C)(3)	29,750.	0.			ELECTION SERVICES
LWV OF NEW JERSEY EDUCATION FUND							
204 WEST STATE STREET							
TRENTON, NJ 08608	22-2407784	501(C)(3)	5,750.	0.			ELECTION SERVICES
LWV OF NEW MEXICO							
2315 SAN PEDRO DR NE STE F6							
ALBUQUERQUE, NM 87110	23-7297241	pu1(C)(3)	12,750.	0.			ELECTION SERVICES

Schedule I (Form 990)

Page 1

(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LWV OF NEW YORK STATE EDUCATION							
FOUNDATION - 62 GRAND STREET -							
ALBANY, NY 12207	13-6215058	501(C)(3)	29,750.	0.			ELECTION SERVICES
LWV OF NORTH CAROLINA INC.							
3509 HAWORTH DR STE 206	FO 1552254	E01/G)/A)	24 252	0			DI DOMEON GERRITANA
RALEIGH, NC 27609	58-1553354	501(C)(4)	24,250.	0.			ELECTION SERVICES
LWV OF OHIO EDUCATION FUND							
17 SOUTH HIGH STREET SUITE 650							
COLUMBUS, OH 43215	31-1050638	501(C)(3)	56,250.	0.			ELECTION SERVICES
LWV OF PENNSYLVANIA EDUCATION FUND							
226 FOSTER ST							
HARRISBURG, PA 17102	46-4971552	501(C)(3)	55,763.	0.			ELECTION SERVICES
LWV OF SOUTH CAROLINA							
54 WAX MYRTLE CT							
HILTON HEAD, SC 29926	57-6026436	501(C)(4)	7,500.	0.			ELECTION SERVICES
	0, 0020100		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
LWV OF SOUTH DAKOTA							
2509 W 31ST STREET							
SIOUX FALLS, SD 57105	36-3927065	501(C)(3)	8,500.	0.			ELECTION SERVICES
LWV OF TENNESSEE EDUCATION FUND							
P.O. BOX 158369		504 (5) (0)	11				L
NASHVILLE, TN 37215	23-7166868	501(C)(3)	11,500.	0.			ELECTION SERVICES
LWV OF TEXAS							
1212 GUADALUPE ST. SUITE 107							
AUSTIN, TX 78701	74-6076962	501(C)(3)	56,250.	0.			ELECTION SERVICES
,			, ,				
LWV OF THE DISTRICT OF COLUMBIA							
1100 15TH ST NW STE 1100							
WASHINGTON DC, DC 20005	52-1087209	501(C)(3)	23,435.	0.			ELECTION SERVICES

Schedule I (Form 990)

Part II Continuation of Grants and Other	er Assistance to Do	mestic Organizations	and Domestic Go	overnments (Scho	eaule i (Form 990), Pa I	π II.)	I
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WV OF VIRGINIA							
011 E. MAIN STREET SUITE 214A							
RICHMOND, VA 23219	54-1334464	501(C)(3)	20,600.	0.			ELECTION SERVICES
LWV OF WISCONSIN							
512 W MAIN STREET SUITE 200							
MADISON, WI 53703	39-1609121	501(C)(3)	62,625.	0.			ELECTION SERVICES

(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	recipients	cash grant	cash assistance	(book, FMV, appraisal, other)	
Part IV Supplemental Information. Provide the information	on required in Part I, lin	e 2; Part III, columr	n (b); and any other ad	ditional information.	
PART I, LINE 2:					
THE LEAGUE OF WOMEN VOTERS EDUCA	ATION FUND R	EQUIRES A	LL GRANTEES	TO SUBMIT	
NARRATIVE AND FINANCIAL REPORTS	FOR GRANTS	RECEIVED.	THE LEAGUE	OF WOMEN	
VOTERS EDUCATION FUND REVIEWS AI	LL GRANT REP	ORTS AND I	EXAMINES SU	PPORTING	
DOCUMENTATION FOR SOME GRANTS.					

#### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Employer identification number 53-0239013

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			l
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			l
				l
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			l
	organization or a related organization:			
а		4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			l
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			37
		5a		X
b	, , ,	5b		<u> </u>
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			v
		6a		X
b	, , ,	6b		
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			v
	, , , , , , , , , , , , , , , , , , , ,	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
_	1	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		i

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

Schedule J (Form 990) 2021

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) VIRGINIA KASE SOLOMON	(i)	148,497.	0.	0.	0.	13,516.	162,013.	0.
CHIEF EXECUTIVE OFFICER	(ii)	148,497.	0.	0.	0.	13,516.	162,013.	0.
(2) CECILIA CALVO	(i)	91,261.	0.	0.	0.	561.	91,822.	0.
CHIEF DEVELOPMENT OFFICER	(ii)	91,261.	0.	0.	0.	561.	91,822.	0.
(3) SARAH COURTNEY	(i)	72,537.	0.	0.	0.	6,597.		0.
CHIEF COMMUNICATIONS OFFICER	(ii)	72,537.	0.	0.	0.	6,597.		0.
(4) CELINA STEWART	(i)	74,471.	0.	0.	0.	3,940.	78,411.	0.
CHIEF COUNSEL	(ii)	74,471.	0.	0.	0.	3,940.	78,411.	0.
(5) KELLY MCFARLAND	(i)	76,895.	0.	0.	0.	432.	77,327.	0.
CHIEF OF STAFF	(ii)	76,895.	0.	0.	0.	432.		0.
(6) JEANETTE SENECAL	(i)	64,836.	0.	0.	0.	12,295.	77,131.	0.
SENIOR DIRECTOR, MISSION I	(ii)	64,836.	0.	0.	0.	12,295.	77,131.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
THE LEAGUE OF WOMEN VOTERS OF THE UNITED STATES (LWVUS) PAYS ALL
COMPENSATION EXPENSES. LWVUS USES THE FOLLOWING METHOD TO ESTABLISH
COMPENSATION OF ITS CHIEF EXECUTIVE OFFICER: COMPENSATION STUDY OR SURVEY,
APPROVAL BY THE BOARD.

## **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

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

Name of the organization LEAGUE OF WOMEN VOTERS EDUCATION FUND Employer identification number 53-0239013

Pai	t I Types of Property				•			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermin	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	6	17,296.	FMV			
10	Securities - Closely held stock			27,2300				
11	Securities - Partnership, LLC, or							
•••								
12								
13	Qualified conservation contribution -							
10								
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19								
20	Food inventory  Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23								
24	Scientific specimens  Archeological artifacts							
25	Archeological artifacts  Other ( )							
26	Other () Other ()							
20 27								
28	Other () Other ()							
29	Number of Forms 8283 received by the organiz	zation during	the tax year for e	ontributions				
29	for which the organization completed Form 82	-	•				0	
	for which the organization completed Form 62	05, Fait V, L	onee Acknowledg	ement 29			Yes	No
302	During the year, did the organization receive by	v contributio	n any property rep	orted in Part I lines 1 throug	nh 28 that it		163	INC
Jua	must hold for at least three years from the date	-						
	exempt purposes for the entire holding period'		ŕ	·		30a		х
h	If "Yes," describe the arrangement in Part II.	•				Jua		
31	Dogs the experiencian have a gift accordance policy that requires the review of any panetandard contributions?						х	
	Does the organization hire or use third parties						-2	$\vdash$
ozd			9	, ,		32a		x
h	contributions?  If "Yes," describe in Part II.					SZa		
33	If the organization didn't report an amount in c	olumn (c) for	a type of property	for which column (a) is cho	cked			
55		.o.u.i.iii (c) 101	a type of property	To willon column (a) is the	oncu,			
	describe in Part II.	olumin (c) ioi	a type of property	Tion which column (a) is one	cked,			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

Schedule M	1 (Form 990) 2021 LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

## **SCHEDULE 0** (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

**Employer identification number** 53-0239013

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE LEAGUE OF WOMEN VOTERS EDUCATION FUND WORKS TO REGISTER VOTERS AND
PROVIDE VOTERS WITH ELECTION INFORMATION THROUGH VOTER GUIDES AS WELL
AS CANDIDATE FORUMS AND DEBATES.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
ADVOCACY: ACTIVITIES TO PROMOTE CIVIC RESPONSIBILITY THROUGH INFORMED
AND ACTIVE PARTICIPATION OF CITIZENS IN GOVERNMENT AND TO PROMOTE
ACTION ON SELECTED ISSUES.
EXPENSES \$ 575,544. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
MEMBERSHIP: EXPENDITURES ARE USED TO ASSIST STATE AND LOCAL LEAGUES
WITH MEMBER RECRUITMENT AND VARIOUS PROGRAMS.
EXPENSES \$ 467,114. INCLUDING GRANTS OF \$ 2,754. REVENUE \$ 0.
COUNCIL AND CONVENTION: THE COUNCIL AND CONVENTION FUNCTION INCLUDES
ACTIVITIES RELATED TO MEETINGS AND OTHER EVENTS, SUCH AS THE BIENNIAL
COUNCIL MEETING.
EXPENSES \$ 1,617. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
PART III, LINES 4 A,B,C,D - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS:
THE LEAGUE OF WOMEN VOTERS EDUCATION FUND (LWVEF) WORKS TO REGISTER
VOTERS AND PROVIDE THEM WITH ELECTION INFORMATION, AS WELL AS HOST
CANDIDATE FORUMS AND DEBATES, WITH THE ULTIMATE GOAL OF EDUCATING
VOTERS AND INCREASING VOTER PARTICIPATION IN EVERY ELECTION. THROUGH

<u>Schedule O (Form 990) 2021</u> Page **2** 

Name of the organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Employer identification number
53-0239013

THESE EFFORTS, LWVEF REACHED MORE THAN 14.9 MILLION VOTERS NATIONWIDE IN FY22.

DURING THIS FISCAL YEAR, JULY 2021-JUNE 2022, LWVEF REGISTERED MORE

THAN 90,000 VOTERS ACROSS THE COUNTRY. LWVEF ACHIEVED THIS IN PART

THROUGH ITS YOUTH VOTER REGISTRATION PROJECT, WHICH ACCOUNTS FOR MORE

THAN 22,000 YOUNG PEOPLE REGISTERED AT 971 LEAGUE-LED REGISTRATION

EVENTS AT SCHOOLS NATIONWIDE DURING THIS TIMEFRAME.

VOTE411.ORG IS THE NONPARTISAN ELECTION WEBSITE, POWERED BY LWVEF,

WHICH PROVIDES VOTERS WITH CUSTOMIZED INFORMATION ABOUT THEIR ELECTION

DAY RESOURCES, INCLUDING THEIR POLLING PLACE LOCATION AND HOURS OF

OPERATION, EARLY OR ABSENTEE VOTING RULES, REGISTRATION DEADLINES, ID

REQUIREMENTS, AND MORE. IN FY22, LWVEF PROVIDED THIS INFORMATION IN

BOTH ENGLISH AND SPANISH LANGUAGES TO VOTERS IN ALL 50 STATES, AND THE

DISTRICT OF COLUMBIA.

THROUGHOUT THE FISCAL YEAR, OVER 2.1 MILLION PEOPLE ACCESSED

VOTE411.ORG FOR VOTER EDUCATION AND INFORMATION PURPOSES. LWVEF

REGISTERED OVER 41,000 VOTERS THROUGH THIS ONLINE PLATFORM. LWVEF ALSO

INCLUDES BALLOT INFORMATION FOR EVERY ELECTION CYCLE ON VOTE411. FOR

THE 2021 GENERAL ELECTION, THE NATIONAL, STATE, AND LOCAL LEAGUES

REACHED OUT TO OVER 27,000 CANDIDATES REQUESTING THAT THEY ANSWER THE

LEAGUE'S NONPARTISAN QUESTIONS FOR THE ONLINE VOTER GUIDE. WITH THE

SUPPORT OF LWVEF, STATE AND LOCAL LEAGUES HOSTED APPROXIMATELY 350

CANDIDATE DEBATES AND FORUMS FROM JULY 2021 TO JUNE 2022 TO FURTHER

ASSIST VOTERS IN LEARNING ABOUT THE CANDIDATES RUNNING FOR OFFICE IN

THEIR COMMUNITIES.

<u>Schedule O (Form 990) 2021</u>

Name of the organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Employer identification number 53-0239013

LWVEF CONTACTED NEARLY 1.2 MILLION VOTERS VIA CANVAS, EMAIL, MAIL,

PHONE, AND TEXT DURING THIS TIMEFRAME TO PROVIDE THEM WITH CRITICAL

ELECTION INFORMATION, INCLUDING HOW TO MAKE A VOTING PLAN, FIND THEIR

POLLING PLACE, LEARN ABOUT EARLY AND ABSENTEE VOTING OPTION, AND

ENCOURAGE THEM TO EXERCISE THEIR RIGHT TO VOTE. ADDITIONALLY, LWVEF

REACHED 10.28 MILLION PEOPLE THROUGH VOTE411-SPECIFIC SOCIAL MEDIA

POSTS, AND OVER 10,000 PEOPLE THROUGH EDUCATIONAL WEBSITE CONTENT

FOCUSED ON LWVEF'S EFFORTS. LWVEF RAN THREE VOTE411 MARKETING CAMPAIGNS

DURING FY22 TO INFORM VOTERS AHEAD OF THE FALL 2021 GENERAL ELECTION,

TEXAS 2022 PRIMARY ELECTION, AND SPRING 2022 PRIMARY ELECTIONS IN

SELECT STATES. IN TOTAL THESE THREE ADVERTISING CAMPAIGNS REACHED OVER

1 MILLION VOTERS.

IN JULY OF 2021 LWEF LAUNCHED A FACEBOOK AND INSTAGRAM CAMPAIGN TO

INFORM PEOPLE ON HOW TO ENGAGE IN THE 2021 REDISTRICTING PROCESS

THROUGH THE LEAGUE'S REDISTRICTING REFORM PROGRAM, PEOPLE POWERED FAIR

MAPS (PPFM). THESE ADS REACHED MORE THAN 90,000 PEOPLE AND SENT MORE

THAN 31,000 PEOPLE TO LEARN MORE ABOUT THE LEAGUE'S WORK. IN SEPTEMBER

OF 2021 LWVEF HELD THREE REDISTRICTING EDUCATIONAL EVENTS INCLUDING A

TWITTER TOWNHALL, A REDDIT ASK ME ANYTHING, AND FACEBOOK LIVE PANEL.

THE DIGITAL EVENTS EARNED MORE THAN 800,000 IMPRESSIONS ACROSS SOCIAL

MEDIA PLATFORMS.

LWVEF CONTINUED TO EXPAND ITS ADVOCACY AND ACTIVISM EFFORTS TO ENGAGE

INDIVIDUALS DURING THIS TIME PERIOD. THIS ADVOCACY AND ACTIVISM

EXPANSION INCLUDED IMPLEMENTING OUTREACHCIRCLE, A DIGITAL PLATFORM THAT

SUPPORTS RELATIONAL ORGANIZING AND PEER-TO-PEER TEXTING TO CREATE

Schedule O (Form 990) 2021 Page 2 **Employer identification number** Name of the organization LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 CHANGE AT THE LOCAL, STATE, AND NATIONAL LEVELS. IN THE SECOND YEAR OF IMPLEMENTING OUTREACHCIRCLE, OVER 60 LEAGUES ACTIVELY USE THE TOOL, WITH MORE THAN 5,000 SUPPORTERS COMPLETING MORE THAN 4,000 DIGITAL ACTIVITIES. AS A NONPARTISAN ORGANIZATION WITH MORE THAN 100 YEARS OF SERVICE, LWVEF IS STRONGLY RECOGNIZED FOR ITS ELECTION WORK IN COMMUNITIES ACROSS THE COUNTRY. FORM 990, PART VI, SECTION A, LINE 6: THE LEAGUE OF WOMEN VOTERS EDUCATION FUND'S ONLY MEMBER IS ITS SISTER ORGANIZATION, THE LEAGUE OF WOMEN VOTERS OF THE UNITED STATES. FORM 990, PART VI, SECTION A, LINE 7A:

THE GOVERNING BOARD OF THE LEAGUE OF WOMEN VOTERS EDUCATION FUND IS ELECTED

BY THE BOARD OF DIRECTORS OF THE LEAGUE OF WOMEN VOTERS OF THE UNITED

STATES. THE GOVERNING BOARD OF THE LEAGUE OF WOMEN VOTERS EDUCATION FUND

ARE ELECTED FOR TWO-YEAR TERMS. CURRENTLY, THE GOVERNING BOARDS OF BOTH

ORGANIZATIONS HAVE OVERLAPPING MEMBERSHIPS.

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

THE BOARD AUDIT COMMITTEE REVIEWS FORM 990 WITH THE EXECUTIVE STAFF BEFORE
THE CHIEF EXECUTIVE OFFICER REVIEWS AND SIGNS

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

THE LEAGUE OF WOMEN VOTERS EDUCATION FUND CHAIR AND EXECUTIVE STAFF ENSURE
THAT ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES SUBMIT WRITTEN CONFLICT OF

Schedule O (Form 990) 2021 Page **2** 

Name of the organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Employer identification number 53-0239013

INTEREST STATEMENTS. THE CHIEF OPERATING OFFICER REVIEWS AND APPROVES ALL

CONTRACTS AND PAYMENTS TO FURTHER ENSURE THAT NO CONFLICTS OF INTEREST

EXIST.

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

THE BOARD DETERMINES THE GOALS OF THE CHIEF EXECUTIVE OFFICER EACH YEAR.

THE CHAIR CONDUCTS AN ANNUAL REVIEW OF THE CHIEF EXECUTIVE OFFICER BASED ON

THESE GOALS, WHICH IS SUPPORTED BY WRITTEN DOCUMENTATION. THE CHAIR USES

THE RESULTS OF THE ANNUAL REVIEW ALONG WITH INDEPENDENTLY PREPARED

COMPARABILITY DATA TO DETERMINE THE CHIEF EXECUTIVE OFFICER'S COMPENSATION,

WHICH IS DOCUMENTED ON A PERSONNEL ACTION FORM.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,IN,IA,KS,KY,LA,ME,MD,MI,MN,MS,MO,MT,NE,NH

NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY,ID,IL,MA,NV,

DC

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

THE LEAGUE OF WOMEN VOTERS EDUCATION FUND POSTS COPIES OF ITS FORM 990S TO

ITS PUBLIC WEBSITE AND ALSO MAKES THE FORMS AVAILABLE UPON REQUEST BY

EMAIL, MAIL, AND FOR PUBLIC INSPECTION AT ITS OFFICE DURING NORMAL BUSINESS

HOURS. THE EDUCATION FUND'S FORM 1023, WHICH WAS ORIGINALLY FILED DURING

THE 1950S, NO LONGER EXISTS. THE EDUCATION FUND'S GOVERNING DOCUMENTS ARE

AVAILABLE TO THE PUBLIC THROUGH THE EDUCATION FUND'S WEBSITE,

WWW.LWV.ORG/CONTENT/EDUCATION-FUND.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER FEES:

Schedule O (Form 990) 2021 Page **2** 

Name of the organization  LEAGUE OF WOMEN VOTERS EDUCATION FUND	Employer identification number 53-0239013
PROGRAM SERVICE EXPENSES	1,256,967.
MANAGEMENT AND GENERAL EXPENSES	11,259.
FUNDRAISING EXPENSES	258,829.
TOTAL EXPENSES	1,527,055.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,527,055.
FORM 990, PART XII, LINE 2C:	
THE AUDIT OVERSIGHT PROCESS HAS REMAINED UNCHANGED FROM TH	HE PRIOR YEAR.
FORM 990, PART XII, LINE 2B:	
AS OF THE DATE OF THIS FILING, THE LEAGUE'S AUDITED FINANCE	CIAL
STATEMENTS FOR THE YEAR ENDED JUNE 30, 2022, WERE BEING PR	REPARED.
	_
	_

132212 11-11-21 Schedule O (Form 990) 2021

#### SCHEDULE R (Form 990)

Part I

# **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

2021

OMB No. 1545-0047

Open to Public Inspection

Identification of Disregarded Entities.	Complete if the organization answered	"Yes" on Form 990, Part IV, line 33.

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Employer identification number 53-0239013

(a)  Name, address, and EIN (if applicable)  of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
E.THEPEOPLE, LLC - 82-1221594					
1233 20TH ST NW					
WASHINGTON, DC 20036	ONLINE RESOURCES	DELAWARE	87,132.	0.	LWVEF

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	<b>(f)</b> Direct controlling entity	1	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
LEAGUE OF WOMEN VOTERS OF THE UNITED STATES							
- 53-0115655, 1233 20TH ST NW, WASHINGTON,	CITIZEN INVOLVEMENT IN						
DC 20036	GOVERNMENT	DISTRICT OF COLUMBIA	501(C)(4)				Х

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

		0 11 1611 1 1 1	"' " " " " " " " " " " " " " " " " " "	D 1 11 / 11 O 4		
Part III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990,	Part IV, line 34,	because it had one or	more related
Part III	organizations treated as a partnership during the tax year.			,		

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	Disprop	ortionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General emanaging partner	(k) Percentage ownership

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership		tion b)(13) rolled tity?
		country)		,				Yes	No
	1								
	1								
	1								
	!								

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No				
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х				
	Gift, grant, or capital contribution to related organization(s)	1b		Х				
С	Gift, grant, or capital contribution from related organization(s)	1c		Х				
	Loans or loan guarantees to or for related organization(s)	1d		Х				
е	Loans or loan guarantees by related organization(s)	1e	Х					
f	Dividends from related organization(s)	1f		Х				
g	Sale of assets to related organization(s)	1g		Х				
	Purchase of assets from related organization(s)	1h		X				
i	Exchange of assets with related organization(s)	1i		X				
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	X					
	Performance of services or membership or fundraising solicitations for related organization(s)	11		X				
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	X					
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X					
	Sharing of paid employees with related organization(s)	10	Х					
р	Reimbursement paid to related organization(s) for expenses	1р	Х					
	Reimbursement paid by related organization(s) for expenses	1q		Х				
r Other transfer of cash or property to related organization(s)								
	Other transfer of cash or property from related organization(s)	1s		Х				
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.							

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
LEAGUE OF WOMEN VOTERS OF THE UNITED			
(1) STATES	K	98,822.	FMV
LEAGUE OF WOMEN VOTERS OF THE UNITED			
(2) STATES	0	2,819,268.	TIME SHEETS
LEAGUE OF WOMEN VOTERS OF THE UNITED			
(3) STATES	P	4,300,000.	CASH RECORDS
LEAGUE OF WOMEN VOTERS OF THE UNITED			
(4) STATES	M	1,585,674.	VENDOR INVOICES
<u>(5)</u>			
<u>(6)</u>			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprotion allocat	por- ate ions?		General manage partner	(k) Al or Percentage ging ownership
	-									
										-
	_							Ochodolo		