			** PUBLIC DISCLOSURE COPY Return of Organization Exempt Fro	/ ** om lr	ncome Tax	OMB No. 1545-0047
For	_ <b>g</b>	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co			2023
1 011			Do not enter social security numbers on this form as it	•		Open to Public
Depa Interr	rtment nal Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the	-	-	Inspection
AF	or th	e 2023 calend	ar year, or tax year beginning $ m JUL1$ , $2023$ and end	ding J	UN 30, 2024	
B	Check if	<b>C</b> Name o	organization		D Employer identifi	cation number
	Addre					
	_chang Name	8	UE OF WOMEN VOTERS EDUCATION FUND		53-02390	10
	_ chang Initial	<u>v</u>	usiness as	om/suite		
	_returr  Final	1233	and street (or P.O. box if mail is not delivered to street address) Roo 20TH STREET, NW 50		E Telephone numbe (202) 26	3-1308
	⊥returr termi ated		own, state or province, country, and ZIP or foreign postal code	0	G Gross receipts \$	8,068,536.
	Amer	nded TATA CI	INGTON, DC 20036		H(a) Is this a group re	
	Appli tion	<sup>ca-</sup> <b>F</b> Name a	nd address of principal officer: CELINA STEWART		for subordinates	
	pend	Ing SAME	AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
11	Tax-ex	empt status: [		527	If "No," attach a	list. See instructions
<u>ا ا</u>	Nebs	ite: LWV.	ORG/LEAGUE-WOMEN-VOTERS-EDUCATION-FU		H(c) Group exemption	
		f organization:	Corporation X Trust Association Other	L Year of	of formation: 1957	<b>V</b> State of legal domicile: <b>D</b>
Pa	art I	Summary				
e	1	Briefly describ	e the organization's mission or most significant activities: <u>SEE</u> SC	HEDU.	LE O	
anc						
ern	2	Check this bo				sets.   17
go	3		ing members of the governing body (Part VI, line 1a)			17
Š	5		of individuals employed in calendar year 2023 (Part V, line 2a)			(
ities	6		of volunteers (estimate if necessary)			5000
Activities & Governance	7 a		d business revenue from Part VIII, column (C), line 12			0.
_◄			business taxable income from Form 990-T, Part I, line 11			0.
					Prior Year	Current Year
e	8	Contributions	and grants (Part VIII, line 1h)		6,385,563.	7,400,881.
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)		159,954.	162,246.
sev.	10		come (Part VIII, column (A), lines 3, 4, and 7d)		235,514.	273,654.
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		167,699.	182,226.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,948,730.	8,019,007.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		443,185. 0.	655,500.
	14	0	to or for members (Part IX, column (A), line 4)		3,195,660.	4,549,973
ses	15	Drofossional f	compensation, employee benefits (Part IX, column (A), lines 5-10)	·····	150,001.	205,385
Expenses	10a	Total fundrais	ng expenses (Part IX, column (D), line 25)		150,001.	205,505
Ă			es (Part IX, column (A), lines 11a-11d, 11f-24e)		3,631,936.	4,398,588.
	18	•	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		7,420,782.	9,809,446.
	19		expenses. Subtract line 18 from line 12		-472,052.	-1,790,439.
or				Be	ginning of Current Year	End of Year
t Assets or d Balances	20	Total assets (F	Part X, line 16)		12,005,150.	13,325,557.
		Total liabilities	(Part X, line 26)		1,843,250.	4,136,859.
-Sec.			fund balances. Subtract line 21 from line 20		10,161,900.	9,188,698.
	art II					
IInd	er nen	alties of neriury	I declare that I have examined this return including accompanying schedules and	d stateme	nts and to the hest of my	knowledge and helief it is

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				Date
Here	CELINA STEWART, CHIEF EXE	CUTIVE OFFICER		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	
Paid	AARON M. FOX	AARON M. FOX		/25 self-employed P01365820
Preparer	Firm's name CBIZ ADVISORS, LI			Firm's EIN 88-1478669
Use Only	Firm's address 1899 L STREET, NW	7 #850		
	WASHINGTON, DC 20	036		Phone no. 202-227-4000
May the IF	RS discuss this return with the preparer shown ab	ove? See instructions		X Yes No
LHA For	Paperwork Reduction Act Notice, see the sepa	rate instructions. 332001 12-21-23		Form <b>990</b> (2023)

Form	990 (2023) LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE 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? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
40	revenue, if any, for each program service reported. (Code:) (Expenses \$ 3,518,988. including grants of \$655,300. ) (Revenue \$)
4a	(Code:) (Expenses \$3,518,988. including grants of \$655,300.) (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.
	INFORTANCE OF VOTING AND TROVIDING CANDIDATE INFORMATION:
	SCHEDULE O PROVIDES ADDITIONAL DETAILED DESCRIPTION OF THE LEAGUE'S
	MISSION IMPACT ACHIEVEMENTS.
4b	(Code: ) (Expenses \$ 1,438,227. including grants of \$ ) (Revenue \$ 162,246.)
	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.
4.0	(Code:) (Expenses \$ 840,430 including grants of \$ ) (Revenue \$ )
4c	(Code:) (Expenses \$ 840,430. including grants of \$) (Revenue \$) (Revenue \$) (COUNCIL AND CONVENTION: THE COUNCIL AND CONVENTION FUNCTION INCLUDES
	ACTIVITIES RELATED TO MEETINGS AND OTHER EVENTS, SUCH AS THE BIANNUAL
	COUNCIL MEETING.
	SCHEDULE O PROVIDES ADDITIONAL DETAILED DESCRIPTION OF THE LEAGUE'S
	COUNCIL AND CONVENTION ACHIEVEMENTS.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 1,558,901. including grants of \$ 200.) (Revenue \$ )
4e	Total program service expenses     7,356,546.
	Form <b>990</b> (2023)
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Form 990 (			-		VOTERS	EDUCATION	FUND		
Part IV Checklist of Required Schedules									

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	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			
	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			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			v
~	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			х
7	provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i> Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
7	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<b>-</b>		
0		8		х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
Ŭ	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
h	Schedule D, Parts XI and XII	12a	_A	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	126		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X 990	(2023)
JJ2003	12-21-23	LOUU		∠∪∠3)

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Form 990 (202					EDUCATION	FUND
Part IV C	Checklist of Require	d Sched	u <b>les</b> <sub>(contin</sub>	nued)		

			Yes	No					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on								
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X					
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						
	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								
	Schedule K. If "No," go to line 25a	24a		_X_					
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease								
	any tax-exempt bonds?	24c							
	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			х					
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a							
a	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	054		x					
06	Schedule L, Part I	25b							
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current								
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		х					
27	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20							
21	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? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		х					
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,	21							
20	instructions for applicable filing thresholds, conditions, and exceptions):								
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>								
	"Yes," complete Schedule L, Part IV	28a		х					
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х					
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>								
	"Yes," complete Schedule L, Part IV	28c		Х					
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х						
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation								
	contributions? If "Yes," complete Schedule M	30		X					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X					
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete								
	Schedule N, Part II	32		X					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations								
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and								
	Part V, line 1	34	X						
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X					
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity								
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b							
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		v						
	If "Yes," complete Schedule R, Part V, line 2	36	X						
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v					
~~	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		<u> </u>					
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v						
Pa	Note: All Form 990 filers are required to complete Schedule O           ttv         Statements Regarding Other IRS Filings and Tax Compliance	38	Х						
	Chack if Schedule O contains a response or note to any line in this Bart V								
			Yes	No					
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable [1a] 6		162	NU					
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1aEnter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b								
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
Ū	(gambling) winnings to prize winners?	1c	х						
332004	4 12-21-23			(2023)					

Form	990 (2023)         LEAGUE OF WOMEN VOTERS EDUCATION FUND         53-0239           t V         Statements Regarding Other IRS Filings and Tax Compliance (continued)         53-0239	013	Pa	age <b>5</b>						
I UI			Vee							
0-			Yes	No						
za	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 0									
L	, , , ,									
	<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?									
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		X						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	30								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4-		x						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>								
a	If "Yes," enter the name of the foreign country									
Fa		Ee		х						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b								
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	60		х						
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		<u></u>						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	Ch								
7		6b								
7	Organizations that may receive deductible contributions under section 170(c). Did the exemptation requires a summation argument in process of $0.75$ mode partly as a contribution and partly for coords and continues provided to the parts?	7-		х						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a								
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	-		x						
	to file Form 8282?	7c								
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.		v						
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h								
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?									
9										
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
a	Initiation fees and capital contributions included on Part VIII, line 12									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11	Section 501(c)(12) organizations. Enter:									
a	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
L	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.									
D	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         Enter the amount of reserves on hand       13c									
		44-		х						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u></u>						
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		x						
	excess parachute payment(s) during the year?	15		<u>^</u>						
16	If "Yes," see the instructions and file Form 4720, Schedule N.	46		x						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16								
17	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									
332005	12-21-23	Form	990	(2023)						
002000				,/						

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Form 990	(2023)
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### LEAGUE OF WOMEN VOTERS EDUCATION FUND

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

53-0239013 Page **6** 

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

						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		17			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		nv other				
_	officer, director, trustee, or key employee?				2		Х
3	Did the organization delegate control over management duties customarily performed by or under the						
Ū	of officers, directors, trustees, or key employees to a management company or other person?				3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 99				4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asse				5		X
6					6	х	
	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or app						
	more members of the governing body?				7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockhol	ders, or				
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		•				
а	The governing body?				8a	Х	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac	hed at	the				
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	renue	Code.)				
						Yes	N
0a	Did the organization have local chapters, branches, or affiliates?				10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	apters,	affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the f	orm?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t				12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye						
	on Schedule O how this was done	,			12c	Х	
3	Did the organization have a written whistleblower policy?				13	Х	
4	Did the organization have a written document retention and destruction policy?				14	Х	
5	Did the process for determining compensation of the following persons include a review and approval						
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	~,					
а	The organization's CEO, Executive Director, or top management official				15a		Х
	Other officers or key employees of the organization				15b		X
Ň	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				100		
62	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ont wi	th a				
Ju					16a		Х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				104		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluate		-				
	exempt status with respect to such arrangements?				16b		
ec	tion C. Disclosure				100		
7	List the states with which a copy of this Form 990 is required to be filed _AL, AK, AZ, AR, CZ		ם דיים כ	ान ज	G۵	нт	тт
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and						
0		u 990		01(0)(0)5	Unity)	avalla	JIE
	for public inspection. Indicate how you made these available. Check all that apply.           X         Own website         Another's website         X         Upon request         Other (explain)	0					
0					finer		
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	ITIICT O	i interest po	mcy, and	inano	lai	
~	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 book ELLEN HOBBY - (202) 263-1327	ks and	records				
	1233 20TH STREET, NW, 500, WASHINGTON, DC 20036					_	
	12-21-23 SEE SCHEDULE O FOR FULL LIST OF STATES					990	

Part VII	Compensation of Officers,	<b>Directors, Trustee</b>	s, Key Employees,	Highest Compensated	
	Employees, and Independe	ent 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, box 6 of 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.

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do	not cl		ition		one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson is	s both	n an	compensation	compensation	amount of
	week			uau	recto	i/uus	lee)	from	from related	other
	(list any	n dividual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	ll trus		/ee	m pe n		1099-NEC)	1033-1120)	and related
	below	dual t	n stit utio nal tru stee	-	ƙey employee	st col	ar	,		organizations
	line)	Indivi	In stit	Officer	Key e	Highest compensated employee	Former			0
(1) VIRGINIA KASE SOLOMON	20.00									
CEO - UNTIL 02/24	20.00			Х				166,316.	166,316.	42,674.
(2) ELLEN HOBBY	24.00									
CHIEF OPERATING OFFICER	16.00			Х				132,373.	88,249.	31,203.
(3) ADAM ABROGI	32.00									
CHIEF OF EXTERNAL AFFAIRS	8.00					X		160,186.	40,047.	39,679.
(4) KELLY MCFARLAND STRATMAN	20.00									
COS, INTERIM CO-CEO - AS OF 02/24	20.00			Х				106,766.	106,766.	17,536.
(5) AYO ATTERBERRY	20.00									
CHIEF OF CULTURE	20.00					х		91,567.	91,567.	41,642.
(6) CELINA STEWART	20.00									
CHIEF COUNSEL	20.00					х		93,179.	93,179.	22,820.
(7) ALMA COUVERTHIE, CHIEF OF	30.00							100 640	42 01 0	22 110
PROGR., INTERIM CO-CEO - AS OF 02/24	10.00			Х				129,649.	43,216.	33,110.
(8) SARAH COURTNEY	20.00							00 407	00 407	15 446
CHIEF COMMUNICATIONS OFFICER	20.00					X		90,497.	90,497.	15,446.
(9) IRENE C JENKINS, SR. DIR.	20.00							01 400	01 400	10 000
DIRECT MAIL AND DIGITAL	20.00					X		81,482.	81,482.	12,006.
(10) SANIA IRWIN, VICE CHAIR	7.50			77				0	0	0
UNTIL 01/24, CHAIR	7.50	Х		Х				0.	0.	0.
(11) DEBORAH TURNER	7.50	x		x				0.	0.	0.
CHAIR - UNTIL 01/24 (12) DIANNA WYNN, DIRECTOR	7.50	^		Δ				0.	0.	0.
UNTIL 01/24, VICE CHAIR	7.50	x		х				0.	0.	0.
(13) TONI MONETTE	7.50			<b>A</b>				0.	0.	0.
SECRETARY	7.50	x		х				0.	0.	0.
(14) LEAH EDWARDS	7.50								••	<b>U</b>
TREASURER	7.50	x		х				0.	0.	0.
(15) TERESA ACUNA	15.00								<b>3 •</b>	<b>.</b>
DIRECTOR	0.00	x						0.	0.	0.
(16) TRACY ADKISON	7.50								-	
DIRECTOR	7.50	x						0.	0.	0.
(17) ASHLEY ALLISON	15.00									
DIRECTOR	0.00	х						0.	Ο.	0.
220007 10 01 02										Form <b>990</b> (2023)

332007 12-21-23

Form 990 (2023)

### 16180213 150872 313229

							ATION FUND	53-02	2390	13	Page <b>8</b>
Part VII Section A. Officers, Directors, Tr	ustees, Key Em	ploy	ees,	and	High	est C	ompensated Employee	s (continued)			
(A)	(B)			(C			(D)	(E)		(	F)
Name and title	Average	(do		Posi		n ono	Reportable	Reportable		Estin	nated
	hours per	box	, unles	ss per	nore tha son is b	oth an	compensation	compensatio	n	amou	unt of
	week	offi	cer an	d a di	rector/tr	ustee)	from	from related	4	otl	her
	(list any	ector					the	organization	s	compe	nsation
	hours for	or dir			ted		organization	(W-2/1099-MIS		from	n the
	related	stee c	ruste		Densa		(W-2/1099-MISC/	1099-NEC)		•	ization
	organizations	al tru:	onal t		loyee	ę.	1099-NEC)				elated
	below	Individual trustee or director	Institutional trustee	Officer	Key employee Highest compensated	employe Former				organi	zations
	line)	lnd	lns	Offi	Key Hig	For			$\rightarrow$		
(18) MELISSA BREACH	7.50										0
DIRECTOR	7.50	Х				_	0.		0.		0.
(19) KIMBERLEY FRASER	15.00										•
DIRECTOR	0.00	Х					0.		0.		0.
(20) KIMBERLY HAMLIN	15.00										
DIRECTOR	0.00	Х					0.		0.		0.
(21) VEDNA HEYWOOD	7.50										
DIRECTOR	7.50	Х					0.		0.		0.
(22) JOAN HUNAULT	7.50										
DIRECTOR	7.50	Х					0.		0.		Ο.
(23) ALEXIS JUDAY-MARSHALL	7.50										
DIRECTOR	7.50	х					0.		0.		0.
(24) ALLYSON KAPIN	15.00										
DIRECTOR	0.00	х					0.		0.		0.
(25) ALLISON RIGGS	7.50	23							<b>~</b> +		
DIRECTOR	7.50	х					0.		0.		0.
(26) NAN SHUKER	15.00	21									
DIRECTOR	0.00	x					0.		0.		0.
	0.00	Λ					1,052,015.	801,31		256	,116.
1b Subtotal							1,052,015.	001,3	0.	200,	0.
c Total from continuation sheets to Part								0.01 27	-	250	
d Total (add lines 1b and 1c)							1,052,015.	801,31		200,	,116.
2 Total number of individuals (including bu	t not limited to th	ose	liste	d ab	ove) v	ho re	eceived more than \$100,	000 of reportable	3		•
compensation from the organization											0
									Г	Y	es No
<b>3</b> Did the organization list any <b>former</b> offic	er, director, trust	ee, k	key e	mple	oyee,	or hig	phest compensated emp	oyee on			
line 1a? If "Yes," complete Schedule J fo	r such individual									3	<u> </u>
4 For any individual listed on line 1a, is the	sum of reportabl	e co	mpe	ensat	tion ar	nd oth	ner compensation from t	ne organization			
and related organizations greater than \$	50,000? If "Yes,	" со	mple	ete S	Schedu	ıle J f	for such individual		L	4 Z	X
5 Did any person listed on line 1a receive of	r accrue comper	nsati	on fr	om a	any ur	relate	ed organization or individ	lual for services			
rendered to the organization? If "Yes." c	omplete Schedule	e J f	or su	ich p	person					5	X
Section B. Independent Contractors											
1 Complete this table for your five highest	compensated inc	lepe	nder	nt co	ontract	ors th	hat received more than \$	100,000 of comp	oensati	on from	
the organization. Report compensation for	or the calendar ye	ear e	endin	ıg wi	ith or \	withir	n the organization's tax y	ear.			
(A)	-						(B)			(C)	
Name and busine	ss address						Description of s	ervices	Cc	ompensa	ation
MARKETEAM AGENCY							FUNDRAISING A	AND			
1200 ABERNATHY RD NE, AT	LANTA. G	А	30	328	8		CONSULTING			293.	,542.
PALMS CASINO RESORT				<u> </u>	-						
4321 W FLAMINGO ROAD, LA	S VEGAS	N	77	89.	103		CONTRACTED SI	RRVICES		288	,207.
WHEREOWARE, INC, 1660 IN							CONTRACTED 5			200,	207.
	I DANAI 10	цЧ	. ப.	DK	911			<b>n</b>		101	726
600, MCLEAN, VA 22102							COMMS SUPPOR	L		191,	,726.
2 Total number of independent contractors		ot lir	nited	l to t	-	isted	above) who received mo	ore than			
\$100,000 of compensation from the orga					3						
SEE PART VII, SECTIO	ON A CONT	ΊN	UΑ	TI	ON	SHE	ETS		F	orm <b>99</b>	0 (2023)

								TION FUND	53-023	9013
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd H	ligh	est (	Compensated Employ	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all	that	app	ly)	compensation	compensation	amount of
	per week					e		from the	from related organizations	other compensation
	(list any	tor				ploye		organization	(W-2/1099-MISC)	from the
	hours for	r direc				ed em		(W-2/1099-MISC)		organization
	related	stee or	ustee			en sat				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest com pensated em ployee				organizations
	below	dividu	stituti	Officer	i em l	ghest	Former			
	line)	Ē	Ë	of	Å	≘	8			
(27) MONICA SKOKO RODRIGUEZ	7.50									
DIRECTOR	7.50	Х						0.	0.	0.
					<u> </u>					
	<u> </u>									
							<u> </u>			
	1									
		1								
		]								
Total to Part VII, Section A, line 1c										

332201 04-01-23

	990 (			IOMEI	N VOTERS	EDUCATION	I FUND	53-0239	013 Page <b>9</b>
Par	rt VII								
		Check if Schedule O c	contains a respo	onse or i	note to any line		(D)	(0)	
						<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
s s	1 a	Federated campaigns	1a						
Contributions, Gifts, Grants and Other Similar Amounts		• • • • •	1b						
ng G		Fundraising events							
iifts ar A		Related organizations							
s, G mila		Government grants (contri			75,000.				
rion	f	All other contributions, gifts,							
ibut		similar amounts not included			25,881.				
ontr of O	-	Noncash contributions included in I	lines 1a-1f 1g \$	<b>5</b> 42	28,649.	- 400 004			
<u>õ</u> <u>e</u>	h	Total. Add lines 1a-1f			1	7,400,881.			
					Susiness Code	162 246	162 246		
ice		LICENSING FEE			900099	162,246.	162,246.		
erv ue	b								
ven S	c d								
Program Service Revenue	u e								
Pro	f	All other program service	revenue						
		Total. Add lines 2a-2f				162,246.			
	3	Investment income (includ							
			-			273,654.			273,654.
	4	Income from investment o	f tax-exempt bor	nd proc	ceeds				
	5	Royalties							
			(i) Real		(ii) Personal				
	6 a		6a 182,22						
	b	Less: rental expenses		0.					
	с.	Rental income or (loss)	6c 182,22			182,226.			182,226.
		Net rental income or (loss) Gross amount from sales of	(i) Securiti		(ii) Other	102,220.			102,220.
	7а	assets other than inventory	7a 49,52						
	h	Less: cost or other basis	14 19 792						
e	~	and sales expenses	7b 49,52	.9.					
enue	с	Gain or (loss)		0.					
		Net gain or (loss)	· · · · ·			0.			
Other R		Gross income from fundraisir							
ŧ		including \$	of						
		contributions reported on	line 1c). See						
		Part IV, line 18		8a					
		Less: direct expenses		8b					
		Net income or (loss) from t	-						
	9 a	Gross income from gaming							
	h	Part IV, line 19 Less: direct expenses		9a 9b					
		Net income or (loss) from g							
		Gross sales of inventory, le							
		and allowances		10a					
	b	Less: cost of goods sold							
		Net income or (loss) from s							
۵				В	usiness Code				
Miscellaneous <u>Revenue</u>	11 a							ļ	
lan.	b			_					
Sev	С			_					
Mis		All other revenue							
		Total. Add lines 11a-11d				8,019,007.	162,246.	0	455,880.
	12	Total revenue. See instructio	110				1 102,240.		Form <b>990</b> (2023

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LEAGUE OF WOMEN VOTERS EDUCATION FUND Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons	se or note to any line in t	his Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> 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	655,500.	655,500.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	621,762.	217,109.	320,465.	84,188.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,244,340.	2,517,768.	539,745.	186,827.
8	Pension plan accruals and contributions (include			-	
	section 401(k) and 403(b) employer contributions)	201,935.	173,744.	20,819.	7,372.
9	Other employee benefits	200,641.	118,921.	70,368.	7,372.
10	Payroll taxes	281,295.	216,751.	44,120.	20,424.
11	Fees for services (nonemployees):				,
	Management				
b		28,779.	21,445.	5,203.	2,131.
c	• ···	59,428.	44,284.	10,744.	4,400.
	Lobbying	3371200	11/2010		1/1001
		205,385.			205,385.
e f	Investment management fees	31,639.		31,639.	205,505.
f		51,055.		51,055	
g	column (A), amount, list line 11g expenses on Sch 0.)	2,094,131.	1,721,840.	93,490.	278,801.
40		2,074,1310	1,721,040.		270,001.
12	Advertising and promotion	574,951.	267,350.	12,841.	294,760.
13	Office expenses	427,715.	389,925.	26,756.	11,034.
14 45	Information technology	=27,715.	505,525.	20,750.	11,034.
15	Royalties	384,173.	286,274.	69,458.	28,441.
16		232,528.	203,506.	28,127.	895.
17		232,320.	203,300.	20,127.	095.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	442,136.	120 200	11 007	2 1 2 1
19	Conferences, conventions, and meetings	442,130.	428,208.	11,807.	2,121.
20					
21	Payments to affiliates	00 210		1 C 1 A 7	C (1)
22	Depreciation, depletion, and amortization	89,310.	66,551.	16,147.	6,612.
23	Insurance	24,891.	18,548.	4,500.	1,843.
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 0.)	0.050	0.000		
а		8,853.	8,822.	31.	
b	TAXES & LICENSES	54.		54.	
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	9,809,446.	7,356,546.	1,306,314.	1,146,586.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here X if following SOP 98-2 (ASC 958-720)	285,214.	285,214.	0.	0.

11

33

Form 990 (2023)

Part X Balance Sheet

Total liabilities and net assets/fund balances

12,005,150. 33

13,325,557. Form **990** (2023)

					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			3,133,864.	2	3,735,752.
	3	Pledges and grants receivable, net			1,450,570.	3	1,396,023.
	4	Accounts receivable, net			34,563.	4	6,426.
	5	Loans and other receivables from any current or			01/0001		0,1201
	Ŭ	trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualif	•	F		J	
	Ŭ	under section 4958(f)(1)), and persons described	•	· ·		6	
6	7	Notes and loans receivable, net		· · · · · · · · · · · · ·		7	
Assets	8	Inventories for sale or use				. 8	
As	9	<b>_</b>			19,352.	9	88,649.
	10a						
		basis. Complete Part VI of Schedule D	10a	285,613.			
	b	Less: accumulated depreciation		252,613.	0.	10c	33,000.
	11	Investments - publicly traded securities			7,074,940.	11	7,991,386.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1			13		
	14	Intangible assets		E CONTRACTOR OF		14	
	15	Other assets. See Part IV, line 11			291,861.	15	74,321.
	16	Total assets. Add lines 1 through 15 (must equa			12,005,150.	16	13,325,557.
	17	Accounts payable and accrued expenses			461,129.	17	1,285,503.
	18	Grants payable			156,313.	18	540,150.
	19	Deferred revenue	72,062.	19	106,215.		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F			641,078.	21	640,464.
S	22	Loans and other payables to any current or form	er office	r, director,			
litie		trustee, key employee, creator or founder, subst	antial co	ontributor, or 35%			
Liabilities		controlled entity or family member of any of thes	e persoi	าร		22	
-	23	Secured mortgages and notes payable to unrela		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelated	l third pa	arties		24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24).	Complete Part X	F10 CC0		1 5 6 4 5 9 5
		of Schedule D			512,668.		1,564,527.
	26	Total liabilities. Add lines 17 through 25			1,843,250.	26	4,136,859.
s		Organizations that follow FASB ASC 958, che	ck here	X			
JCe		and complete lines 27, 28, 32, and 33.			7 005 201		
alaı	27				7,905,291. 2,256,609.	27	6,654,255. 2,534,443.
dB	28	Net assets with donor restrictions			2,250,009.	28	2,554,445.
Űn:		Organizations that do not follow FASB ASC 99	58, cnec	к nere			
orF	00	and complete lines 29 through 33.				00	
Net Assets or Fund Balances	29 20	Capital stock or trust principal, or current funds				29 20	
SSE	30 21	Paid-in or capital surplus, or land, building, or eq				30	
et⊿	31 22	Retained earnings, endowment, accumulated inc			10,161,900.	31 32	9,188,698.
Ž	32	Total net assets or fund balances			12 005 150	32	13 325 557

LEAGUE OF WOMEN VOTERS EDUCATION FUND

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

53-0239013 Page 11

_	990 (2023) LEAGUE OF WOMEN VOTERS EDUCATION FUND	53-	<u>0239</u>	013	Pag	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,01</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>,809</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3		,79		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10	,16:		
5	Net unrealized gains (losses) on investments	5		798	3 <b>,</b> 7	99.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8		18	3,4	38.
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	9	<u>,188</u>	3,6	98.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			<u></u>		
			r		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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	L
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audi <sup>,</sup>	t			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2023)

sc	HEC	DULE A		Dublic Che	with Ctatula an					OMB No. 1545-0047
(Fo	rm 99	0)			rity Status an					2023
				• •	47(a)(1) nonexempt cha					2025
		f the Treasury nue Service			ttach to Form 990 or Fo /Form990 for instruction			ormation		Open to Public Inspection
Nan	ne of t	the organizati		Go to www.n3.gov			atest ini		Employer	identification number
		5		UE OF WOME	N VOTERS EDU	CATION	I FUNI	)		3-0239013
Pa	rt I	Reason			(All organizations must c					
The	organ				(For lines 1 through 12, c					
1		A church, cor	nvention of ch	urches, or associatio	on of churches described	l in sectio	n 170(b)(1	)(A)(i).		
2		A school des	cribed in <b>sect</b>	ion 170(b)(1)(A)(ii).	(Attach Schedule E (Forn	n 990).)				
3		A hospital or	a cooperative	hospital service org	anization described in se	ection 170	(b)(1)(A)(ii	i).		
4		A medical res	earch organiz	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,
		city, and state	-							
5					ollege or university owned	l or operate	ed by a go	vernmental u	nit describe	ed in
•				Complete Part II.)				<i>,</i> ,		
6 7	X	$\square$ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).						while described is		
'									Dudiic described in	
8		section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)								
9	H	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	
Ŭ		-		•	culture (see instructions).		-		-	-
		university:		,			·····, ··· <b>,</b>	,		
10		An organizati	on that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
		activities relation	ted to its exen	npt functions, subject	ct to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support fi	rom gross investment
		income and u	inrelated busir	ness taxable income	e (less section 511 tax) fro	om busines	ses acqui	red by the org	ganization a	fter June 30, 1975.
		See section	509(a)(2). (Co	mplete Part III.)						
11		An organizati	on organized a	and operated exclus	ively to test for public sa	fety. See	section 50	)9(a)(4).		
12		An organizati	on organized a	and operated exclus	ively for the benefit of, to	perform tl	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly	supported or	ganizations describe	ed in section 509(a)(1) o	or section &	509(a)(2).	See section	<b>509(a)(3).</b> (	Check the box on
		lines 12a thro	ugh 12d that	describes the type o	of supporting organization	n and com	plete lines	12e, 12f, and	l 12g.	
а		<b>Type I.</b> A su	upporting orga	anization operated, s	supervised, or controlled	by its supp	ported org	anization(s), t	ypically by	giving
		the support	ed organizatio	on(s) the power to re	gularly appoint or elect a	majority o	of the direc	tors or truste	es of the su	ipporting
		organizatio	n. You must c	complete Part IV, S	ections A and B.					
b		<b>Type II.</b> A s	supporting org	anization supervised	d or controlled in connect	tion with its	s supporte	d organizatio	n(s), by hav	ring
		control or n	nanagement o	f the supporting org	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported
	_	¬ ~	. ,	t complete Part IV,						
С		••	-	• •	ng organization operated				lly integrate	d with,
	_		•	. , .	s). You must complete l				4 - 4	
d		••	-	• •	porting organization oper			• •	•	
				<b>°</b>	zation generally must sat			•	an attentiv	reness
е		7			mplete Part IV, Sections written determination fro					
C			•		mally integrated supporti			турет, туре	п, туре п	
f	Ente	er the number of		rachizationa						
g				n about the supporte						
		i) Name of suppo		(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed	(v) Amount o	f monetary	(vi) Amount of other
		organization	I		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)

Total

### Schedule A (Form 990) 2023 LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not								
	include any "unusual grants.")	5519516.	5519979.	7311203.	6385563.	7400881.	32137142.		
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	5519516.	5519979.	7311203.	6385563.	7400881.	32137142.		
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)						3017530.		
	Public support. Subtract line 5 from line 4.						29119612.		
Sec	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
7	Amounts from line 4	5519516.	5519979.	7311203.	6385563.	7400881.	32137142.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources $\dots$	208,246.	313,565.	296,854.	384,786.	455,880.	1659331.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)		149,403.	128,643.	159.		278,205.		
11	Total support. Add lines 7 through 10						34074678.		
	Gross receipts from related activities,	,	,			12	910,748.		
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, t	fourth, or fifth tax y	ear as a section 5	01(c)(3)			
0.0	organization, check this box and stop								
	ction C. Computation of Publi		-	. (2)			05 46		
	Public support percentage for 2023 (I					14	85.46 %		
	Public support percentage from 2022					15	84.78 %		
16a	33 1/3% support test - 2023. If the o						V		
	stop here. The organization qualifies		-						
D	33 1/3% support test - 2022. If the conductor have The exception much								
47.	and <b>stop here.</b> The organization qual		•••		10 10 10				
1/a	I7a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization								
	-			-		-			
1-	meets the facts-and-circumstances te	0	•		•	Ze and line 1E is			
D	10% -facts-and-circumstances test	-							
	more, and if the organization meets the								
19	organization meets the facts-and-circu Private foundation. If the organization				• •				
10	The organization in the organization	an did fiot offect a l		a, 100, 17a, 01 170	, oncor this box di		(Form 990) 2023		
							······································		

Schedule A (Form 990) 2023	LEAGUE	OF	WOMEN	VOTERS	EDUCATION	FUND	53-0239013	Page 3
Part III Support Schedule fo	r Organizati	ons	Describe	ed in Section	on 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	clion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	3 (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 disgualified 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.)						
	ction B. Total Support		•		1		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
	Amounts from line 6			(-/	(-,		
	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						
	Add lines 10a and 10b 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	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) orgai	nization,
					-	-	
Sec	ction C. Computation of Publ	ic Support Per	centage				
	Public support percentage for 2023 (		•	column (f))		15	%
	Public support percentage from 2022					16	%
	ction D. Computation of Inves					<u> </u>	
	Investment income percentage for <b>2</b> Investment income percentage from					17 18	<u>%</u> %
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box a						
h	<b>33 1/3% support tests - 2022.</b> If the	-	•				'3%. and
~	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization						
	23 12-21-23		2000 017 110 17, 10	., ci 100, oncor i			dule A (Form 990) 2023
55202			16			Gener	

1

2

3a

Yes No

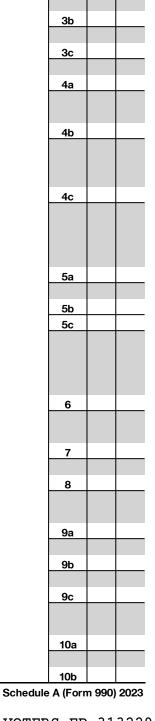
### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

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

332024 12-21-23



2023.05050 LEAGUE OF WOMEN VOTERS ED 313229\_1

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# Schedule A (Form 990) 2023 LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 Page 5

1 4	cupper ling organizations (continuea)			
			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		
Sec	tion B. Type I Supporting Organizations			
			Yes	No

1	d the organization operate for the benefit of any supported organization other than the supported ganization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in art VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	_
2	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	

Section C. Type II Supporting Organizations							
			Yes				
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)

Section E	).	All Typ	e 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		
3	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		

### Section 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 (s	C	on used to satisfy the Integral Part Test during the year (see instruction	ns).
--	---	--	------

a The organization satisfied the Activities Test. Complete line 2 below.

b		The organization	is the parent of	of each of its	supported of	organizations.	Complete line 3 be	elow.
---	--	------------------	------------------	----------------	--------------	----------------	--------------------	-------

c		The organization	supported a	governmental entity.	Describe in Part	VI how	you supported a	governmental entity	(see instruction <u>s)</u>	).
---	--	------------------	-------------	----------------------	------------------	--------	-----------------	---------------------	----------------------------	----

18

- 2 Activities Test. Answer lines 2a and 2b below.
- a 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.
- 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a 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.** 

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.* 332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

3a

No

Yes No

16180213 150872 313229

Sche	dule A (Form 990) 2023 LEAGUE OF WOMEN VOTERS			53-0239013 Page 6				
Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations							
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.							
	All other Type III non-functionally integrated supporting organizations must	t complet	e Sections A through E.					
Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)					
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3.	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or							
	collection of gross income or for management, conservation, or							
	maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see							
	instructions for short tax year or assets held for part of year):							
a	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
C	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other factors							
	(explain in detail in Part VI):							
2	Acquisition indebtedness applicable to non-exempt-use assets	2						
3	Subtract line 2 from line 1d.	3						
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,							
	see instructions).	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 0.035.	6						
_7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C - Distributable Amount			Current Year				
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 0.85 of line 1.	2						
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3						
_4	Enter greater of line 2 or line 3.	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to							
	emergency temporary reduction (see instructions).	6						
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting of	organization (see				

instructions).

Schedule A (Form 990) 2023

LEAGUE OF WO	MEN VOTERS	EDUCATION	FUND
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		EN VOTERS EDUCA		5	3-0239013 Page 7
Par		a)(s) Supporting Orga	mzations (continu	ued)	
Secti	on D - Distributions			-	Current Year
1	Amounts paid to supported organizations to accomplish exer			1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
_3	Administrative expenses paid to accomplish exempt purpose	3	3		
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro		5		
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 LEAGUE OF WOMEN VOTERS EDUCATION FUND 53-0239013 Page Part VI Supplemental Information. Provide the explanations required by Part II, line 10: Part II, line 173 or 17b: Part III, line 12:
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
OTHER INCOME
2019 AMOUNT: \$ 0.
2020 AMOUNT: \$ 149,403.
2021 AMOUNT: \$ 128,643.
2022 AMOUNT: \$ 159.
2023 AMOUNT: \$ 0.

### \*\* PUBLIC DISCLOSURE COPY \*\*

# **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

# 2023

Employer identification number

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

Ι

FACIT	$\cap \nabla$	WOMEN	ᠶᢕᡣᢑᠣ᠙	EDUCATION	רואדי
LAGOL	Or	MOLIFIN	AOIUVO	EDUCATION	LOND

53-0239013

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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 for an *exclusively* set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set is the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in t

**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).

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Name of organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 900,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 300,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 250,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 X Person Payroll 237,500. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll 200,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 6 X Person Payroll 150,000. Noncash \$ (Complete Part II for noncash contributions.)

53-0239013

Employer identification number

Page 2

323452 12-26-23 16180213 150872 313229

(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
		\$	
323453 12-26	D-23		Schedule B (Form 990) (2023)

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## LEAGUE OF WOMEN VOTERS EDUCATION FUND

Schedule B (Form 990) (2023) Name of organization

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

16180213 150872 313229

2023.05050 LEAGUE OF WOMEN VOTERS ED 313229\_1

Schedule B (Form 990) (2023)

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Page 3

Employer identification number

53-0239013

	B (Form 990) (2023)		Page 4
Name of o	rganization		Employer identification number
	E OF WOMEN VOTERS EDUCAT	FION FUND	53-0239013
Part III	from any one contributor. Complete columns (a)	through (e) and the following line ent charitable, etc., contributions of <b>\$1,000 or</b>	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year try. For organizations less for the year. (Enter this info. once.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gif	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from	(h) Dumenes of vitt		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gif nd ZIP + 4	ft Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
	Transferee's name, address, a	(e) Transfer of gif nd ZIP + 4	ft Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gif	
·	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
323454 12-26	)-23		Schedule B (Form 990) (2023)

16180213 150872 313229

SCHEDULE	D
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(Form	990)
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# **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.

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



Department of the Treasury Internal Revenue Service

Name of the organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Employer identification number 53 - 0239013

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	ised funds
	are the organization's property, subject to the organization's of	exclusive legal control?	Yes 🛄 No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose	e conferring
_			
Par			, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreat	tion or education)	of a historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а			
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included on line 2c acqui		
	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	e organization during the tax
	year		
4	Number of states where property subject to conservation eas		-
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
7	Amount of our anone inclusion in manifesting inspecting hand	ling of violations, and onforcing concern	ation accompate during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and emorcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170	
U			
9	In Part XIII, describe how the organization reports conservation		
•	balance sheet, and include, if applicable, the text of the footn	•	
	organization's accounting for conservation easements.		
Par		Art, Historical Treasures, or O	other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	blic exhibition, education, or research in	furtherance of public
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that describes these ite	ms.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	therance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1	-	\$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2023
	09-28-23		

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	dule D (Form 990) 2023 LEAGUE( t III Organizations Maintaining C	OF WOMEN VC						<u>3901</u>		e 2
3	Using the organization's acquisition, accessio							Contin	<u>luea)</u>	
3	collection items (check all that apply).		, check any of the f	ollowing that h	lake siyi	lincant use	01115			
•	Public exhibition	d		hange program						
a L		u			I					
b	Scholarly research	e	Other							
c	Preservation for future generations	Used a second second state	1				- Deal			
4	Provide a description of the organization's co						n Part J	XIII.		
5	During the year, did the organization solicit or							7.4	<u> </u>	
Da	to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arrange					000 D	<u>.                                     </u>	Yes		No
r ai	TIV Escrow and Custodial Arranger reported an amount on Form 990, Par		e if the organization	answered "Ye	s" on Fo	orm 990, Pa	art IV, III	ne 9, or		
1a	Is the organization an agent, trustee, custodia	an. or other intermed	iarv for contribution	s or other asse	ts not in	cluded				
	on Form 990, Part X?							Yes	X	No
b	If "Yes," explain the arrangement in Part XIII a						🖵	]		
-			ennig tablet					Amoun	t	
c	Beginning balance					1c				
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance					1f				
	Did the organization include an amount on Fo					· · · · ·	X	Yes		No
	If "Yes," explain the arrangement in Part XIII.				•		ـــــ	]	X	
Par							<u></u>			
		(a) Current year	(b) Prior year	(c) Two years		<b>d)</b> Three year	s back	(e) Four	r years ba	ick
1a	Beginning of year balance	598,250.	502,480.	1,191,	556.	789	,255.		773,41	19.
b	Contributions	,	,	, ,			<u>,</u>		,	
	Net investment earnings, gains, and losses	229,013.	132,428.	-627,	148.	443	,399.		54,34	16.
	Grants or scholarships	, ••		<b>/</b>			/			
	Other expenditures for facilities									
e		16,331.	36,658.	61	928.	35	,079.		34,12	20
f	Administrative expenses						,019.		4,39	
		810,932.	598,250.	502,	480	1,191	,		789,25	
g	End of year balance [ Provide the estimated percentage of the curr		· ·		100.	1,191	,		,05,25	
2	Board designated or quasi-endowment	• 0000	(interity, columnia) %	) Heiu as.						
	Permanent endowment 82.5069	%								
b	1 - 4001									
C										
2-	The percentages on lines 2a, 2b, and 2c should be there and summer funds not in the percent		ion that are hold an	d administars	fortho					
38	Are there endowment funds not in the posses	ssion of the organizat	lion that are neid ar	ia administered	a for the			l	Yes	No
	organization by:							20(1)		X
	(i) Unrelated organizations?							3a(i)		X X
								3a(ii)		<u>~</u>
	If "Yes" on line 3a(ii), are the related organization							3b		
4 Par	t VI Land, Buildings, and Equipm		ment tunds.							
1 41	Complete if the organization answered		Part IV line 11a S	ee Form 990 F	Part X lin	ne 10				
								(d) Dee		
	Description of property	(a) Cost or ot basis (investm	• •	or other	• •	cumulated reciation		( <b>d)</b> Boo	k value	
4.	Land		Dabis		ucpi	Solution				
	Land						-			
	Buildings						+-			
	Leasehold improvements						+			
	Equipment		20	5 612	21	50 £10		2	3 000	
	Other			5,613.		52,613			$\frac{3,000}{2,000}$	
<u>i ota</u>	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	<u>, line 10c, column</u>	( <u>B))</u>					3,000	
						Sc	nedule	D (Forn	n 990) 20	J23

Part VII Investments - Other Securities Complete if the organization answered "		e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of secu	urity) (b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B	))		
Part VIII Investments - Program Related			
Complete if the organization answered "	Yes" on Form 990, Part IV, lin	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B	))		
Part IX Other Assets		•	
Complete if the organization answered "	Yes" on Form 990, Part IV, lin	e 11d. See Form 990, Part X, line 15.	
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 1 Part X Other Liabilities	5, col. (B))		
Complete if the organization answered "	Yes" on Form 990, Part IV, lin	e 11e or 11f. See Form 990, Part X, I	ne 25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DUE TO LWVUS			1,452,446
(3) LEASE LIABILITY - OPERA	TING		72,511
(4) ACCRUED SUBLEASE LOSS			24,883
(5) SECURITY DEPOSITS			14,687.
(6)			
(7)			
(8)			
(9)			
(9) Total. (Column (b) must equal Form 990, Part X, line 2	25 col (B))		1,564,527

LEAGUE OF WOMEN VOTERS EDUCATION FUND

53-0239013 Page 3

332053 09-28-23

Schedule D (Form 990) 2023

Sche	edule D (Form 990) 2023 LEAGUE OF WOMEN VOTERS EDU	CATION	I FUND	53-	0239013 Page	<b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per R			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a					
1	Total revenue, gains, and other support per audited financial statements			1	15,422,555	•
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	798,799			
b	Donated services and use of facilities	2b	6,617,950	•		
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	18,438	•		
е	Add lines 2a through 2d			2e	7,435,187	
3	Subtract line 2e from line 1			3	7,987,368	•
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	31,639	•		
b	Other (Describe in Part XIII.)	4b				
с	Add lines <b>4a</b> and <b>4b</b>			4c	<u>31,639</u> 8,019,007	•
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	8,019,00/	•
	Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990. Part I. line 12.)</i>	ents Wit	h Expenses per		8,019,007 n	<u> </u>
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII       Reconciliation of Expenses per Audited Financial Statemed         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents Wit	h Expenses per		'n	
	rt XII Reconciliation of Expenses per Audited Financial Statem	ents Wit	h Expenses per		n 16,395,757	
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents Wit	h Expenses per		'n	
<b>Pa</b>	Reconciliation of Expenses per Audited Financial Statemed           Complete if the organization answered "Yes" on Form 990, Part IV, line 12a           Total expenses and losses per audited financial statements	ents Wit	h Expenses per		'n	
Pa 1 2	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	ents With	h Expenses per		'n	
Pa 1 2 a	<b>rt XII Reconciliation of Expenses per Audited Financial Statemed</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	ents With 	h Expenses per		'n	
Pa 1 2 a	<b>Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	ents With	h Expenses per		n 16,395,757	
Pa 1 2 a b c d	<b>rt XII Reconciliation of Expenses per Audited Financial Statement</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	2a 2b 2c 2d	h Expenses per 6,617,950		n 16,395,757 6,617,950	<u>/.</u>
Pa 1 2 a b c d	<b>Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d	h Expenses per 6,617,950	Retur	n 16,395,757	<u>/.</u>
Pa 1 2 a b c d e	<b>rt XII Reconciliation of Expenses per Audited Financial Statement</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	2a 2b 2c 2d	h Expenses per 6,617,950	Retur	n 16,395,757 6,617,950	<u>/.</u>
Pa 1 2 b c d 3	<b>Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	h Expenses per 6,617,950	Retur	n 16,395,757 6,617,950	<u>/.</u>
Pa 1 2 a b c d e 3 4	<b>Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	ents With 2a 2b 2c 2d 2d	h Expenses per 6,617,950	Retur	n 16,395,757 6,617,950 9,777,807	).
Pa 1 2 3 4 4	<b>Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a           2b           2c           2d	h Expenses per 6,617,950 31,639	Retur	n 16,395,757 6,617,950 9,777,807 31,639	).
Pa           1           2           a           b           c           d           e           3           4           b           c           5	<b>TXII Reconciliation of Expenses per Audited Financial Statement</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a           2b           2c           2d	h Expenses per 6,617,950 31,639	Retur 1 2e 3 4c	n 16,395,757 6,617,950 9,777,807	).

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 IV, LINE 2B:

THE	ED	UCAT	TION	FUN	D RE	CEIV	ES A	ND D	ISBU	RSES	CASH	ON	BEHALF	OF	ITS	AFFI	LIATED
STA:	ΓE	AND	LOC	AL L	EAGU	ES,	WHIC	<u>H AR</u>	E NO	NCON'	<u> </u>	ED S	STAND-AI	LONE	EN D	CITIE	S THAT
HAVI	EΒ	EEN	GRA	NTED	AFF	ILIA	TION	STA	TUS.	THEF	REFORI	Ξ, Ζ	AMOUNTS	HEI	D OI	I BEH	ALF OF
STAT	ΓE	AND	LOC	AL L	EAGU	ES R	EPRE	SENT	THE	AGGI	REGATI	E LI	IABILITY	ζ, Ν	HICH	I IS	EQUAL
то	ГНE	CAS	зн н	ELD	ON B	EHAL	FOF	STA	TE A	ND LO	CAL I	LEA	GUES.				

PART V, LINE 4:

THE EDUCATION FUND HAS A POLICY THAT ALLOWS AN ANNUAL APPROPRIATION OF NO

MORE THAN 10% AND NO LESS THAN 5% OF THE AVERAGE FAIR VALUE OF THE

ENDOWMENT FUND FROM THE TRAILING THREE YEARS. FOR THE YEARS ENDED JUNE 30,

2024 AND	2023,	ANNUAL	EARNINGS	FROM	THE	ENDOWMENT	FUND	IN	EXCESS	OF	5%
332054 09-28-23									Sched	lule D	(Form 990) 2023

 Schedule D (Form 990) 2023
 LEAGUE OF WOMEN VOTERS EDUCATION FUND
 53-0239013 Page 5

 Part XIII
 Supplemental Information (continued)
 WERE REINVESTED TO ALLOW FOR THE FUND'S GROWTH. IN ESTABLISHING THIS

 POLICY, THE EDUCATION FUND CONSIDERED THE LONG-TERM EXPECTED RETURN ON THE

 ENDOWMENTS. THIS IS CONSISTENT WITH THE EDUCATION FUND'S OBJECTIVE TO

 MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT FUNDS, AS WELL AS TO

 PROVIDE ADDITIONAL REAL GROWTH THROUGH NEW GIFTS AND INVESTMENT RETURN.

PART X, LINE 2:

THE EDUCATION FUND EVALUATED ITS UNCERTAINTY IN INCOME TAXES FOR THE YEARS ENDED JUNE 30, 2024 AND 2023, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

PRIOR PERIOD ADJUSTMENT

18,438.

Schedule D (Form 990) 2023

332055 09-28-23

SCHEDULE G	Suppleme	ntal Information	tion Regarding	Func	Iraisi	ing or Gaming A	ctivi	ties	OMB No. 1545-0047
(Form 990)						Part IV, line 17, 18, o rm 990-EZ, line 6a.	or 19, o	or if the	2023
Department of the Treasury		At	tach to Form 990	or Forr	n 990	-EZ.			Open to Public
Internal Revenue Service		o www.irs.gov/l	orm990 for instru	ctions	and t	he latest information	n		Inspection
Name of the organization	n								entification number
			VOTERS ED					53-0239	
	complete this par		organization answe	ered "Y	'es" or	n Form 990, Part IV, I	ine 17	7. Form 990-E2	Z filers are not
c Phone solici d X In-person so 2 a Did the organization	tions email solicitations tations dicitations on have a written c red in Form 990, P d highest paid indiv	s or oral agreement art VII) or entity in viduals or entities	e X Solicita f X Solicita g Special with any individual	ition of ition of I fundra (incluc irofessi	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		X Yes	
(i) Name and addres or entity (fund		(ii)	Activity	have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (o f	Amount paid r retained by) jundraiser ed in col. <b>(i)</b>	<b>(vi)</b> Amount paid to (or retained by) organization
MARKETEAM, LLC - 1	200			Yes	No				
ABERNATHY ROAD NE,	SUITE 400,	MARKETING			x	3,348,405.		205,385.	3,143,020.
Total						3,348,405.		205,385.	3,143,020.
3 List all states in wh or licensing.	ich the organizatio	n is registered o	licensed to solicit	contrib	utions	or has been notified	it is e	exempt from re	egistration

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY DC

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990) 2023

LHA 332081 09-13-23

LEAGUE OF WOMEN VOTERS EDUCATION FUND

53-0239013 Page 2

Part II 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 FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	
						(d) Total events (add col. (a) through col. (c))
۵.			(event type)	(event type)	(total number)	
enue						
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
s	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct E	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10			· · · ·		
	11	Net income summary. Subtract line 10 from I	ine 3, column (d)			
Pa	irt	<b>Gaming.</b> Complete if the organization	answered "Yes" on Form	n 990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	т			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	4					
	1	Gross revenue	<u>_</u>			
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4					
		Rent/facility costs				
	5	Other direct expenses				
	5		Yes%	Yes%	<b>Yes</b> %	
	-	Other direct expenses		└── Yes % └── No	☐ Yes % ☐ No	
	6	Other direct expenses	└── Yes %		No	
	6	Other direct expenses	Yes% No	□ No	<u>No</u>	
	6	Other direct expenses	Yes% No	□ No	<u>No</u>	
	6 7 8 En	Other direct expenses	Yes% No  5 in column (d) from line 1, column (d) ucts gaming activities:	No	<u>No</u>	
а	6 7 8 En	Other direct expenses	Yes% No  5 in column (d)  from line 1, column (d)  ucts gaming activities: ctivities in each of these	No No	<u>No</u>	YesNo
а	6 7 8 En	Other direct expenses	Yes% No  5 in column (d)  from line 1, column (d)  ucts gaming activities: ctivities in each of these	No No	<u>No</u>	Yes No
а	6 7 8 En	Other direct expenses	Yes% No  5 in column (d)  from line 1, column (d)  ucts gaming activities: ctivities in each of these	No No	<u>No</u>	Yes No
a b	6 7 8 En 1s	Other direct expenses	Yes% No  5 in column (d) from line 1, column (d) ucts gaming activities:	States?	<u>No</u> <u></u>	
a b 10a	6 7 8 1 Is : 0 If "	Other direct expenses	Yes% No  ' from line 1, column (d)  ucts gaming activities: ctivities in each of these s evoked, suspended, or te	states?	<u>No</u> <u></u>	
a b 10a	6 7 8 1 Is : 0 If "	Other direct expenses	Yes% No  ' from line 1, column (d)  ucts gaming activities: ctivities in each of these s evoked, suspended, or te	states?	<u>No</u> <u></u>	
a b 10a	6 7 8 1 Is : 0 If "	Other direct expenses	Yes% No  ' from line 1, column (d)  ucts gaming activities: ctivities in each of these s evoked, suspended, or te	states?	<u>No</u> <u></u>	
a b 10a b	6 7 8 9 If " 9 If "	Other direct expenses	Yes% No  ' from line 1, column (d)  ucts gaming activities: ctivities in each of these s evoked, suspended, or te	states?	ear?	

Schedule G (Form 990) 2023

Schedule G (Form 990) 2023	LEAGUE OF WOM	IEN VOTERS	EDUCATION	FUND 53-	0239013 Page	3
<b>11</b> Does the organization conduct g	aming activities with nonme	mbers?			Yes N	ю
<b>12</b> Is the organization a grantor, be						
to administer charitable gaming					Yes N	0
<b>13</b> Indicate the percentage of gamin	ng activity conducted in:				1 1	
<b>a</b> The organization's facility						%
<b>b</b> An outside facility					13b	%
<b>14</b> Enter the name and address of t	ne person who prepares the	organization's gam	ning/special events b	ooks and records:		
Name						
Address						
<b>15a</b> Does the organization have a co	ntract with a third party from	whom the organiz	ation receives gamin	g revenue?	🗌 Yes 📃 N	ю
<b>b</b> If "Yes," enter the amount of ga	ning revenue received by the	eorganization	\$	and the amount		
of gaming revenue retained by th		g	·			
c If "Yes," enter name and addres						
Name						
Address						
<b>16</b> Gaming manager information:						
Name						
Gaming manager compensation	\$					
	·					
Description of services provided						
						—
Director/officer	Employee	Independer	nt contractor			
17 Mandatory distributions:						
<b>a</b> Is the organization required und	er state law to make charitab	le distributions fror	n the gaming procee	ds to		
retain the state gaming license?						0
<b>b</b> Enter the amount of distribution	•	be distributed to o	ther exempt organiza	ations or spent in the		
organization's own exempt activ		\$				
	rmation. Provide the expl as applicable. Also provide ar				art III, lines 9, 9b, 10b,	
		-				_
SCHEDULE G, PART I,	LINE 2B, LIST	OF TEN H	IGHEST PAID	) FUNDRAISER	S:	
· · · · · · · · · · · · · · · · · · ·						_
(I) NAME OF FUNDRAI	SER: MARKETEAM	, LLC				
(I) ADDRESS OF FUND	RAISER:					
1200 ABERNATHY ROAD	NE, SUITE 400	, ATLANTA	, GA 30328	3		_
332083 09-13-23				Sche	dule G (Form 990) 20	23

Schedule G	(Form 990) Supplemental Infor	LEAGUE OF	WOMEN	VOTERS	EDUCATION	FUND	53-0239013	Page 4
Part IV	Supplemental Infor	mation (continued	)					
							Schedule G (F	orm 990)

SCHEDULE I (Form 990)	Go	Frants and Oth vernments, an ete if the organization	d Individual	s in the Ŭni <sup>-</sup>	ted States		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		Go to youry ire	Attach to Form .gov/Form990 for		ntion		Open to Public Inspection
Name of the organization	WOMEN VO	TERS EDUCAT:					Employer identification number 53-0239013
Part I General Information on Grants a		IERS EDUCAL	ION FOND				33-0239013
<ol> <li>Does the organization maintain records t criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's pro-</li> </ol>	o substantiate the stance?						on X Yes No
Part II Grants and Other Assistance to recipient that received more than S	Domestic Organiz	zations and Domestic	Governments. C	complete if the orga	anization answered "Y	es" on Form 990, Parl	IV, line 21, for any
<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
LWV OF THE DISTRICT OF COLUMBIA 1100 15TH ST NW, STE 1100 WASHINGTON, DC 20005	52-1087209	501(C)(3)	69,250.	0.			ELECTION SERVICES
LWV OF WISCONSIN 612 W MAIN ST, STE 200 MADISON, WI 53703	39-7013765	501(C)(4)	46,000.	0.			ELECTION SERVICES
LWV OF GEORGIA 800 JOHNSON FERRY RD NE, STE B ATLANTA, GA 30342	58-0600853	501(C)(4)	39,500.	0.			ELECTION SERVICES
LWV OF TEXAS 1212 FUADALUPE ST, STE 107 AUSTIN, TX 78701	74-6076962	501(C)(3)	30,000.	0.			ELECTION SERVICES
LWV OF MICHIGAN 600 W SAINT JOSEPH ST, STE 3G LANSING, MI 48933	05-0592001	501(C)(3)	29,000.	0.			ELECTION SERVICES
LWV OF MAINE PO BOX 863 AUGUSTA, ME 04332	01-6020634		27,250.	0.			ELECTION SERVICES
<ul> <li>2 Enter total number of section 501(c)(3) and</li> <li>3 Enter total number of other organizations</li> </ul>							15

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Schedule I (Form 990) 2023

### LEAGUE OF WOMEN VOTERS EDUCATION FUND

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		TERS EDUCAT					53-0239013 Pag
Part II         Continuation of Grants and Other .           (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
LWV OF PENNSYLVANIA 1425 CROOKED HILL RD, POB 60890 HARRISBURG, PA 17106	46-4971552	501(C)(4)	25,000.	0.			ELECTION SERVICES
WV OF NORTH CAROLINA 509 HAWORTH DR, STE 206 RALEIGH, NC 27609	58-1553354	501(C)(4)	23,000.	0.			ELECTION SERVICES
WV OF KENTUCKY 15 S EWING AVE OUISVILLE, KY 40206	61-0463058	501(C)(4)	20,000.	0.			ELECTION SERVICES
WV OF OHIO 100 EAST BROAD ST, STE 1310 COLUMBUS, OH 43215	31-1050638	501(C)(4)	20,000.	0.			ELECTION SERVICES
WV OF MINNESOTA 500 RICE ST, STE 201 GAINT PAUL, MN 55103	36-3300249	501(C)(3)	19,250.	0.			ELECTION SERVICES
WV OF ARIZONA 934 E CAMELBACK RD, 120, BOX 277 PHOENIX, AZ 36830	74-2783709	501(C)(3)	17,900.	0.			ELECTION SERVICES
WV OF FLORIDA 001 NORTH ORANGE AVE RLANDO, FL 32801	59-0905672	501(C)(4)	17,000.	0.			ELECTION SERVICES
WV OF COLORADO 410 GRANT STREET, STE B204 ENVER, CO 80203	84-1135313	501(C)(3)	15,750.	0.			ELECTION SERVICES
WV OF MISSOURI 706 MANCHESTER RD, STE 104 ST LOUIS, MO 63144	43-1344654	501(C)(3)	15,000.	0.			ELECTION SERVICES

Schedule I (Form 990)

#### LEAGUE OF WOMEN VOTERS EDUCATION FUND Schedule I (Form 990) .....

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(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	
WV OF NEW YORK							
62 GRAND ST							
ALBANY, NY 12207	51-0227548	501(C)(3)	14,000.	0.			ELECTION SERVICES
LWV OF ALABAMA							
1321 DAUPHIN ST							
MOBILE, AL 36604	23-7058948	501(C)(4)	12,000.	0.			ELECTION SERVICES
LWV OF NEW MEXICO							
2315 SAN PEDRO DR NE, STE F6							
ALBUQUERQUE, NJ 87110	23-7297241	501(C)(3)	12,000.	0.			ELECTION SERVICES
LWV OF VIRGINIA							
1011 E MAIN ST, STE 214A RICHMOND, VA 23219	54-1334464	501(C)(3)	11,500.	0.			ELECTION SERVICES
RICHMOND, VR 23213	54 1554404	501(0)(5)	11,500.				ELECTION SERVICES
LWV OF ARKANSAS							
712 N ASH ST							
LITTLE ROCK, AR 72205	71-6055758	501(C)(4)	10,000.	0.			ELECTION SERVICES
LWV OF LOUISIANA							
247 COLEMAN LOOP	50.0041000	501 ( 2) ( 4)	10.000				
HOMER, LA 71040	72-0641906	501(C)(4)	10,000.	0.			ELECTION SERVICES
LWV OF MISSISSIPPI							
PO BOX 55505							
JACKSON, MS 32296	23-7032695	501(C)(4)	10,000.	0.			ELECTION SERVICES
LWV OF SOUTH DAKOTA							
2509 W 31ST ST							
SIOUX FALLS, SD 57105	46-6016048	501(C)(4)	10,000.	0.			ELECTION SERVICES
LWV OF TENNESSEE							
PO BOX 158369							
NASHVILLE, TN 37215	62-6051527	501(C)(4)	10,000.	Ο.			ELECTION SERVICES

Schedule I (Form 990)

# Schedule I (Form 990) LEAGUE OF WOMEN VOTERS EDUCATION FUND Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

5	3 –	023	901	3	Page 1
-	J	045	<b>JUT</b>	J	Page I

Part II Continuation of Grants and Other	r Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	t II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IN OF KANGAG							
WV OF KANSAS 515 S KANSAS AVE, STE C							
COPEKA, KS 66603	48-6119262	501(C)(3)	8,000.	0.			ELECTION SERVICES
				<b>·</b>			
WV OF NEVADA							
645 NETWORK CIRCLE							
AS VEGAS, NV 89156	94-2591461	501(C)(4)	7,000.	٥.			ELECTION SERVICES
WV OF DALLAS							
060 N CENTRAL EXPWY, STE 500							
DALLAS, TX 75206	75-1876278	501(C)(3)	5,500.	0.			ELECTION SERVICES

Schedule I (Form 990)

### Schedule I (Form 990) 2023 LEAGUE OF WOMEN VOTERS EDUCATION FUND

53-0239013

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance				
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.					
PART I, LINE 2:									
THE LEAGUE OF WOMEN VOTERS EDUCATION	ON FUND (	LWVEF) PRC	VIDES GRAN	T FUNDING TO					
STATE LEAGUES CONSISTING OF 501(C)	(3) AND 5	01(C)(4) E	NTITIES IN	SUPPORT OF					
VOTER EDUCATION EFFORTS. GRANT FUNI	DS MUST B	E USED FOR	2 501(C)(3)	-PERMISSIBLE					
CHARITABLE AND EDUCATIONAL ACTIVIT	IES CARRI	ED OUT IN	COMPLIANCE	WITH LWVEF					
POLICIES. POTENTIAL GRANTEES ARE RE	EQUIRED T	O SUBMIT A	N APPLICAT	ION FOR					
GRANT FUNDING THAT DETAILS INTENDED	D USAGE O	F THE FUND	S, WHICH L	WVEF					
CAREFULLY REVIEWS TO ENSURE THAT FU									

### THOSE POLICIES. ALL GRANTEES ARE ALSO REQUIRED TO SUBMIT NARRATIVE AND

Schedule I (Form 990)	LEAGUE OF	WOMEN VOTERS	EDUCATION FUND	53-0239013 Page 2
Part IV Supplemental In	formation			
FINANCIAL REPORTS	FOR GRANTS J	RECEIVED. LWV	EF REVIEWS ALL	GRANT REPORTS AND
EXAMINES SUPPORTIN	IG DOCUMENTA	TION FOR SOME	GRANTS TO ENSU	RE THAT FUNDS WERE
USED FOR THE SPECI	FIED PURPOS	ES, AND DISBU	RSES THE FINAL	PORTION OF GRANT
FUNDING ONLY UPON	RECEIPT OF H	REPORTS FROM	THE GRANTEE.	

Schedule I (Form 990)

332291 04-01-23

SC	HEDULE J	Compensation Information		OMB No. 1	545-004	17	
(Fo	rm 990)	- For certain Officers, Directors, Trustees, Key Employees, and Highest		20	ົງງ	)	
		Compensated Employees		20	Ľ٦	)	
Dono	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic	
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction		
Nam	e of the organization	1		r identification numbe			
		LEAGUE OF WOMEN VOTERS EDUCATION FUND	53-0	023901	3		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c	,	nal use				
	Travel for com						
	—	ation and gross-up payments					
	Discretionary	spending account Personal services (such as maid, chauffer	ır, chef)				
-							
b	-	on line 1a are checked, did the organization follow a written policy regarding payment or					
~	•	rovision of all of the expenses described above? If "No," complete Part III to explain		<u>1b</u>			
2	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and onice	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
3	Indicate which if a	ny, of the following the organization used to establish the compensation of the organization's					
U	,	ector. Check all that apply. Do not check any boxes for methods used by a related organization of					
		ation of the CEO/Executive Director, but explain in Part III.	511 10				
	Compensation						
	·	ompensation consultant Compensation survey or study					
		ther organizations Approval by the board or compensation of	ommittee				
			ommittee				
4	During the year, dic	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a re						
а	Receive a severance	e payment or change of control payment?		4a		Х	
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X	
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		X	
	If "Yes" to any of lir	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
		)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n				
	contingent on the r						
						X	
b		ation?		<u>5</u> b		X	
_		r 5b, describe in Part III.					
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n				
	contingent on the n	-				v	
						X X	
b		ation?		<u>6b</u>			
-		r 6b, describe in Part III.					
1		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		-	х		
0		ies 5 and 6? If "Yes," describe in Part III reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th		7	Λ		
8				8		x	
9		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		····· <b>o</b>			
J	Regulations section			9			
For		53.4958-6(c)? on Act Notice, see the Instructions for Form 990.		ule J (Forn	n 990)	2023	
. 01			Ochec			-020	

### 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.

(A) Name and Title		(B) Breakdown of W	-2 and/or 1099-MIS0 compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) VIRGINIA KASE SOLOMON	(i)	151,316.	15,000.	0.	13,120.	8,217.	187,653.	0.
CEO - UNTIL 02/24	(ii)	151,316.	15,000.	0.	13,120.	8,217.	187,653.	0.
(2) ELLEN HOBBY	(i)	131,173.	1,200.	0.	10,628.	8,094.	151,095.	0.
CHIEF OPERATING OFFICER	(ii)	87,449.	800.	0.	7,085.	5,396.	100,730.	0.
(3) ADAM ABROGI	(i)	158,586.	1,600.	0.	13,360.	18,383.	191,929.	0.
CHIEF OF EXTERNAL AFFAIRS	(ii)	39,647.	400.	0.	3,340.	4,596.	47,983.	0.
(4) KELLY MCFARLAND STRATMAN	(i)	105,766.	1,000.	0.	8,439.	329.	115,534.	0.
COS, INTERIM CO-CEO - AS OF 02/24	(ii)	105,766.	1,000.	0.	8,439.	329.	115,534.	0.
(5) AYO ATTERBERRY	(i)	90,567.	1,000.	0.	7,603.	13,218.	112,388.	0.
CHIEF OF CULTURE	(ii)	90,567.	1,000.	0.	7,603.	13,218.	112,388.	0.
(6) CELINA STEWART	(i)	92,179.	1,000.	0.	7,603.	3,807.	104,589.	0.
CHIEF COUNSEL	(ii)	92,179.	1,000.	0.	7,603.	3,807.	104,589.	0.
(7) ALMA COUVERTHIE, CHIEF OF	(i)	128,149.	1,500.	0.	10,648.	14,185.	154,482.	0.
PROGR., INTERIM CO-CEO - AS OF 02/24	(ii)	42,716.	500.	0.	3,549.	4,728.	51,493.	0.
(8) SARAH COURTNEY	(i)	89,497.	1,000.	0.	7,394.	329.	98,220.	0.
CHIEF COMMUNICATIONS OFFICER	(ii)	89,497.	1,000.	0.	7,394.	329.	98,220.	0.
(9) IRENE C JENKINS, SR. DIR.	(i)	80,607.	875.	0.	5,707.	296.	87,485.	0.
DIRECT MAIL AND DIGITAL	(ii)	80,607.	875.	0.	5,707.	296.	87,485.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

#### 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.

PART I, LINE 7:

NON-FIXED, DISCRETIONARY BONUSES WERE PAID DURING THE CALENDAR YEAR ENDING

DECEMBER 31, 2023.

Schedule J (Form 990) 2023

SCHEDULE	Μ
(Form 990)	

Department of the Treasury Internal Revenue Service

# **Noncash Contributions**

OMB No. 1545-0047

**Open to Public** 

Inspection

23

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 3	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

2

Pa	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of	Noncash contribution	Method of de		•	
		applicable	contributions or items contributed	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	tion an	nounts	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	17	428,649.	FMV			
10	Securities - Closely held stock		<u> </u>	120,0130				
11	Securities - Partnership, LLC, or							
12	0 11 NF 11							
13	Qualified conservation contribution -							
10								
14	Augulified conservation contribution - Other							
15								
16	Real estate - Residential Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19								
20	Food inventory Drugs and medical supplies							
20								
22	Taxidermy Historical artifacts							
23								
23 24	Scientific specimens							
24 25	Archeological artifacts							
25 26	Other ()							
	Other ()							
27	Other ()							
<u>28</u> 29	Other ( ) Number of Forms 8283 received by the organiz	ration during	l the tax year for e					
23	for which the organization completed Form 828		, ,					
		, i ait v, b	once Acknowledg				Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part L lines 1 throug	h 28. that it		103	
000	must hold for at least 3 years from the date of t							
	exempt purposes for the entire holding period?		-			30a		х
b	If "Yes," describe the arrangement in Part II.					000		
31	Does the organization have a gift acceptance p	olicy that re	auires the review o	of any nonstandard contribut	ions?	31	x	
32a						01		
<b></b> u			•			32a		x
b	If "Yes," describe in Part II.					JEU		
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	r for which column (a) is cher	cked.			
	describe in Part II.							

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

Schedule M (Form 990) 2023

LHA 332141 09-11-23

Schedule M (Form 990) 2023		-			EDUCATION		53-0239013	Page <b>2</b>
Part II Supplement	al Informatio	n. Pro	ovide the in	formation requ	uired by Part I, lines	30b, 32b, ar	d 33, and whether the organizati	ion
is reporting in P	art I, column (b),	the nu	imber of coi	ntributions, the	e number of items re	eceived, or a	combination of both. Also comp	lete

this part for any additional information.

# SCHEDULE M, PART I, COLUMN (B):

# THIS COLUMN REPRESENTS THE NUMBER OF CONTRIBUTIONS, NOT THE NUMBER OF

CONTRIBUTED ITEMS.

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



53-0239013

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE LEAGUE OF WOMEN VOTERS EDUCATION FUND WORKS TO REGISTER VOTERS AND

LEAGUE OF WOMEN VOTERS EDUCATION FUND

PROVIDE VOTERS WITH ELECTION INFORMATION THROUGH VOTER GUIDES AS WELL

AS CANDIDATE FORUMS AND DEBATES.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

EXTERNAL AFFAIRS: THE EXTERNAL AFFAIRS FUNCTION, WHICH BEGAN DURING THE

YEAR ENDED JUNE 30, 2024, INCLUDES FACILITATING PARTNERSHIPS AND

THOUGHT LEADERSHIP OPPORTUNITIES TO EXPAND THE REACH OF LEAGUE OF WOMEN

VOTERS AND INCREASE ITS RECOGNITION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

ADVOCACY: EXPENDITURES ARE USED TO PROMOTE CIVIC RESPONSIBILITY THROUGH

INFORMED PARTICIPATION OF CITIZENS IN GOVERNMENT AND ACTION ON SELECTED

ISSUES.

EXPENSES \$ 670,638. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

EXTERNAL AFFAIRS: THE EXTERNAL AFFAIRS FUNCTION INCLUDES FACILITATING

PARTNERSHIPS AND THOUGHT LEADERSHIP OPPORTUNITIES TO EXPAND THE REACH

OF LEAGUE OF WOMEN VOTERS AND INCREASE ITS RECOGNITION.

EXPENSES \$ 440,570. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

MEMBER SERVICES: EXPENDITURES ARE USED TO ASSIST STATE AND LOCAL

LEAGUES WITH MEMBER RECRUITMENT AND VARIOUS PROGRAMS.

EXPENSES \$ 244,009. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023	Page 2
Name of the organization LEAGUE OF WOMEN VOTERS EDUCATION FUND	Employer identification number 53-0239013
OUTCOME AND EVALUATION: THE OUTCOME AND EVALUATION FUNCTION	N IS
COLLECTING AND ANALYZING DATA TO MEASURE OUR IMPACT.	
EXPENSES \$ 203,684. INCLUDING GRANTS OF \$ 200. REVENUE	\$ 0.

FORM 990, PART III, LINES 4A-D, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT THE LEAGUE OF WOMEN VOTERS EDUCATION FUND (LWVEF) AIMS TO EDUCATE VOTERS AND INCREASE VOTER PARTICIPATION IN EVERY ELECTION. LWVEF WORKS YEAR-ROUND TO REGISTER VOTERS, PROVIDE THEM WITH ELECTION INFORMATION, AND HOST CANDIDATE FORUMS AND DEBATES. AS A NONPARTISAN ORGANIZATION WITH MORE THAN 100 YEARS OF SERVICE, LWVEF IS STRONGLY RECOGNIZED FOR ITS ELECTION WORK IN COMMUNITIES ACROSS THE COUNTRY.

VOTE411.ORG, LWVEF'S NONPARTISAN ELECTION WEBSITE, PROVIDES VOTERS WITH CUSTOMIZED INFORMATION ABOUT THEIR ELECTION DAY RESOURCES. THESE INCLUDE THEIR POLLING PLACE LOCATION AND HOURS OF OPERATION, EARLY OR ABSENTEE VOTING RULES, REGISTRATION DEADLINES, ID REQUIREMENTS, CANDIDATE GUIDES AND MORE. IN FY24, 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, JULY 2023-JUNE 2024, NEARLY 4.5 MILLION PEOPLE ACCESSED VOTE411 FOR VOTER EDUCATION AND INFORMATION PURPOSES. LWVEF REGISTERED OVER 28,300 VOTERS THROUGH THIS ONLINE PLATFORM. LWVEF ALSO INCLUDES BALLOT INFORMATION FOR EVERY ELECTION CYCLE ON VOTE411. IN THE RUNUP TO THE GENERAL ELECTION THE NATIONAL, STATE, AND LOCAL LEAGUES REACHED OUT TO OVER 40,000 CANDIDATES REQUESTING THAT THEY ANSWER THE LEAGUE'S NONPARTISAN QUESTIONS FOR VOTE411'S ONLINE VOTER GUIDE.

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Name of the organization

LEAGUE OF WOMEN VOTERS EDUCATION FUND

Employer identification number 53 - 0239013

LWVEF CONTACTED MORE THAN 5.3 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 OPTIONS, AND ENCOURAGE THEM TO EXERCISE THEIR RIGHT TO VOTE. ADDITIONALLY, LWVEF REACHED 10.27 MILLION PEOPLE THROUGH VOTE411-SPECIFIC SOCIAL MEDIA POSTS, AND PEOPLE VIEWED EDUCATIONAL CONTENT ON LWV.ORG MORE THAN 80,000 TIMES. LWVEF RAN TWO VOTE411 MARKETING CAMPAIGNS DURING FY24 TO INFORM VOTERS AHEAD OF THE SPRING AND SUMMER 2024 PRIMARY ELECTIONS, INCLUDING OUR MOST SUCCESSFUL CAMPAIGN EVER TO REACH SPANISH-SPEAKING VOTERS. IN TOTAL, THESE ADVERTISING CAMPAIGNS REACHED OVER 3.5 MILLION VOTERS.

DURING THIS FISCAL YEAR, IN PARTNERSHIP WITH STATE AND LOCAL LEAGUES, LWVEF REGISTERED MORE THAN 269,000 VOTERS ACROSS THE COUNTRY. LWVEF ACHIEVED THIS IN PART THROUGH ITS NATURALIZATION CEREMONY REGISTRATION PROJECT, WHICH ACCOUNTED FOR MORE THAN 47,700 NEWLY NATURALIZED PEOPLE REGISTERED AT MORE THAN 1,160 NATURALIZATION CEREMONIES NATIONWIDE DURING THIS TIMEFRAME.

IN AN EFFORT TO COUNTER MIS- AND DISINFORMATION THROUGHOUT THE ELECTION CYCLE AND TO ADVANCE BETTER PUBLIC UNDERSTANDING OF THE DEMOCRATIC AND ELECTORAL PROCESS, THE LWVEF CREATED A NEW DO'S AND DON'TS OF ELECTION DISINFORMATION EDUCATIONAL HANDOUT (IN ENGLISH AND SPANISH), DISTRIBUTING NEARLY 100,000 COPIES. LWVEF ALSO SUPPORTED STATE AND LOCAL LEAGUES AS THEY ENGAGED IN NEARLY 2,500 MEETINGS WITH ELECTIONS OFFICIALS, HELD NEARLY 600 PUBLIC FORUMS FOCUSED ON THE MECHANICS OF 332212 11-14-23 48

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2023.05050 LEAGUE OF WOMEN VOTERS ED 313229 1

WITH THE SUPPORT OF LWVEF, STATE AND LOCAL LEAGUES HOSTED NEARLY 2,000 CANDIDATE DEBATES AND FORUMS FROM JULY 2023 TO JUNE 2024 TO FURTHER ASSIST VOTERS IN LEARNING ABOUT THE CANDIDATES RUNNING FOR OFFICE IN THEIR COMMUNITIES.

THROUGHOUT FISCAL YEAR 2024, THE LWVEF CONTINUED ITS TOUR TO BUILD POWER ACROSS THE SOUTH, AND MORE PARTICULARLY IN ARKANSAS, FLORIDA, GEORGIA, KENTUCKY, NORTH CAROLINA, AND SOUTH CAROLINA TO DEVELOP A COLLECTIVE VISION BASED ON A SHARED ANALYSIS AND STRATEGY. THIS TOUR EMPOWERED LEADERS THROUGH TRAININGS ON HOW INDIVIDUALS CAN USE PERSONAL RELATIONSHIPS TO ADVANCE LWVEF EFFORTS.

FROM JULY 1, 2023, TO JUNE 30, 2024, THE LEAGUE OF WOMEN VOTERS AND STATE AND LOCAL LEAGUES ENGAGED IN LEGAL ADVOCACY AROUND THE COUNTRY, PRIMARILY IN OUR CAMPAIGN FOR MAKING DEMOCRACY WORK. LEAGUES ALSO ENGAGED IN LITIGATION AROUND THE ISSUES OF REPRODUCTIVE JUSTICE, EDUCATION, AND LGBTQIA+ RIGHTS. DURING THIS FISCAL YEAR, THE LEAGUE WAS ACTIVE IN 75 MATTERS, INCLUDING 49 FEDERAL CASES AND REDISTRICTING MATTERS AND 26 STATE MATTERS, AS REPORTED TO LWV. SEVENTEEN CASES WERE RESOLVED DURING THE FISCAL YEAR, AND 57 CASES REMAINED ACTIVE INTO THE NEXT. OVER 3,600,000 VOTERS WERE PROTECTED BY THE LEAGUE'S LEGAL EFFORTS IN FY24.

IN SPRING 2024, WE LAUNCHED OUR ONE PERSON ONE VOTE CAMPAIGN TO ABOLISH THE ELECTORAL COLLEGE. THIS INCLUDED THE CREATION OF A DIGITAL LANDING PAGE, EMAIL LIST, AND VARIOUS EDUCATIONAL MATERIALS EXPLAINING THE 332212 11-14-23 Schedule O (Form 990) 2023

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Schedule O (Form 990) 2023	Page <b>2</b>
Name of the organization LEAGUE OF WOMEN VOTERS EDUCATION FUND	Employer identification number 53-0239013
PRESIDENTIAL ELECTORAL PROCESS. OUR DIGITAL RESOURCES, SUC	H AS BLOGS

AND OUR CAMPAIGN LANDING PAGE, EARNED MORE THAN 66K VIEWS THROUGHOUT

THE FISCAL YEAR.

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 AUDIT COMMITTEE OF THE BOARD REVIEWS THE FORM 990 WITH THE EXECUTIVE STAFF BEFORE THE CHIEF EXECUTIVE OFFICER REVIEWS AND SIGNS. IN ADDITION, A COPY OF THE FORM 990 IS PROVIDED TO THE ENTIRE BOARD PRIOR TO FILING.

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

INTEREST STATEMENTS. THE CHIEF OPERATING OFFICER REVIEWS AND APPROVES ALL

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CONTRACTS AND PAYMENTS TO ENSURE THAT NO CONFLICTS OF INTEREST EXIST.

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

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Schedule O (Form 990) 2023

Schedule O (Form 990) 2023	Page 2
Name of the organization           LEAGUE         OF         WOMEN         VOTERS         EDUCATION         FUND	Employer identification number 53-0239013
THE LEAGUE OF WOMEN VOTERS OF THE UNITED STATES (LWVUS) P.	AYS ALL
COMPENSATION EXPENSES. LWVUS USES THE FOLLOWING METHOD TO	ESTABLISH
COMPENSATION:	
THE BOARD DETERMINES THE GOALS OF THE CHIEF EXECUTIVE OFF.	CER EACH YEAR.

THE EXECUTIVE COMMITTEE CONDUCTS AN ANNUAL REVIEW OF THE CHIEF EXECUTIVE OFFICER BASED ON THESE GOALS, WHICH IS SUPPORTED BY WRITTEN DOCUMENTATION. THE EXECUTIVE COMMITTEE 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. A COMPENSATION/MARKET ANALYSIS IS PERFORMED EVERY THREE YEARS FOR KEY EMPLOYEES.

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,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO MT,NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY, DC

FORM 990, PART VI, SECTION C, LINE 19:
THE LEAGUE OF WOMEN VOTERS EDUCATION FUND POSTS COPIES OF ITS FORM 990S ON
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 ARTICLES OF
INCORPORATION, BYLAWS, AND OTHER GOVERNING DOCUMENTS ARE AVAILABLE TO THE
PUBLIC THROUGH THE EDUCATION FUND'S WEBSITE:
WWW.LWV.ORG/LEAGUE-WOMEN-VOTERS-EDUCATION-FUND.

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Schedule O (Form 990) 2023 Name of the organization LEAGUE OF WOMEN VOTERS EDUCATION FUND	Pa Employer identification num 53-0239013
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OTHER PROFESSIONAL FEES:	1 701 040
PROGRAM SERVICE EXPENSES	1,721,840
MANAGEMENT AND GENERAL EXPENSES	93,490
FUNDRAISING EXPENSES	278,801
TOTAL EXPENSES	2,094,131
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,094,131

# SCHEDULE R

(Form 990)

# **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.

OMB No. 1545-0047

2023 Open to Public Inspection

Employer identification number 53 - 0239013

Department of the Treasury Internal Revenue Service

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

Name of the organization

### LEAGUE OF WOMEN VOTERS EDUCATION FUND

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

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
	-				

# 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.

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

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

Schedule R (Form 990) 2023

#### LEAGUE OF WOMEN VOTERS EDUCATION FUND Schedule R (Form 990) 2023

53-0239013 Page 2

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

	· · · · · · · · · · · · · · · · · · ·											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)		i)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	Gene mana part	ral or aging ner?	Percentage ownership
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	No	
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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. Part IV

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

# Part III

# Schedule R (Form 990) 2023 LEAGUE OF WOMEN VOTERS EDUCATION FUND

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

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Y	es
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts	s II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			$\square$
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	1h		
i Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)		_	_
k Lease of facilities, equipment, or other assets from related organization(s)	1k	2	x
Performance of services or membership or fundraising solicitations for related organization(s)		_	
m Performance of services or membership or fundraising solicitations by related organization(s)		η   Σ	Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		Σ	Х
o Sharing of paid employees with related organization(s)		, Σ	X
p Reimbursement paid to related organization(s) for expenses		Σ	x
<b>q</b> Reimbursement paid by related organization(s) for expenses		4	
r Other transfer of cash or property to related organization(s)	<u>1r</u>		
s Other transfer of cash or property from related organization(s)	1s		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
LEAGUE OF WOMEN VOTERS OF THE UNITED			
(1) STATES	K	124,412.	FMV
LEAGUE OF WOMEN VOTERS OF THE UNITED			
(2) STATES	M	1,174,085.	VENDOR INVOICES
LEAGUE OF WOMEN VOTERS OF THE UNITED			
(3) STATES	0	3,996,467.	TIME SHEETS
LEAGUE OF WOMEN VOTERS OF THE UNITED			
(4) STATES	P	5,200,000.	CASH
(5)			
(6)			

# Schedule R (Form 990) 2023 LEAGUE OF WOMEN VOTERS EDUCATION FUND

### 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)	(b)	(c)	(d)	(e	<b>e)</b>	(f)	(g)	()	ר)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)		Are partner 501(c org: Yes		Share of total income	Share of end-of-year assets	Dispr tior alloca <b>Yes</b>	tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managin partner	ownership
				103				165		(***********	103 110	<u></u>
												<b>_</b>
												+
												+
	]											
												+

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# Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2023

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