# Form **990**

## **Return of Organization Exempt From Income Tax**

2020

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

Α	For the	e 2020 ca	lendar year, or tax year begii	nning	7/1/2020	, and e	nding	6/			
В	Check if a	applicable:	C Name of organization VIR	GINIA COUNCIL OF	N ECONOMIC E	DUCATION		D Employ	er identif	ication number	
	Address	change	Doing business as								
$\overline{\Box}$			Number and street (or P.O. box	if mail is not delivered to	street address)	Room/suite		23-70870	52		
Ш	Name change		301 W. MAIN STREET, BO	X 844000			1	E Telepho	ne numbe	er	
	Initial retu	urn	City or town		State	ZIP code		(004) 000	1007		
$\equiv$			RICHMOND		VA	23284		(804) 828	-1627		
Ш	Final return	n/terminated	Foreign country name	Foreign province/sta	ate/county	Foreign postal	code				
	Amended	d return		<b>.</b>	,			G Gross r	eceipts \$	g	52,688
$\equiv$										_	
Ш	Application	on pending	F Name and address of principal of					nis a group retui	n for suborc	dinates? Yes	X No
			Daniel R. Mortensen 301 W	/. Main Street, Box	844000, Richr	mond, VA 23	H(b) Are	e all subordin	ates includ	ded? Yes	No
	Tax-exer	mpt status:	X 501(c)(3) 501(c) (	) <b>&lt;</b> (insert no.	4947(a)(1)	or 527	If "	No," attach a	list. See i	nstructions	
		•		, (	,	, 6 62.				_	
J	Website	: <b>&gt;</b> ww	w.vcee.org					oup exemptio	n number		
K	Form of o	organizatior	n: X Corporation Trust	Association	Other >	L Yea	ar of forma	ation: 197	0 M S	State of legal domicile	: VA
:	art I	Su	mmary								
	1		lescribe the organization's m	ission or most sign	ificant activitie	e. VCE	F is the	critical re	source f	for	
ø	'		s K-12 teachers and school						30uice i		
Ĕ											
Activities & Governance			ım and resources to help tea								
Š	2	Check to	his box ▶ if the organiz	zation discontinued	l its operations	or disposed	of more	e than 25%	₀ of its r	net assets.	
ŏ	3	Number	of voting members of the go	verning body (Par	t VI, line 1a) 🗻				3		43
∞ ජ	4	Number	of independent voting mem	bers of the governi	ng body (Part	VI. line 1b).			4		43
<u>.</u>	5		ımber of individuals employe						5		2
₹	6		imber of volunteers (estimate	-					6		
ţ			related business revenue fro						7a		
1	7a										0
	b	Net unre	elated business taxable inco	me from Form 990	- I, Part I, line	11	<u></u>		7b		0
	_							Prior Year		Current Yea	
ě	8		utions and grants (Part VIII, I			· · · · .			86,594	8	371,644
ne Eu	9		n service revenue (Part VIII,						37,100		9,201
Revenue	10	Investm	ent income (Part VIII, columi	n (A), lines 3, 4, an	d 7d)				-4,783		28,768
œ	11	Other re	evenue (Part VIII, column (A)	, lines 5, 6d, 8c, 9d	, 10c, and 11e	e)			0		0
	12		enue—add lines 8 through 11					1.0	18,911	Ç	09,613
	13		and similar amounts paid (Pa					-,-	0	<del>-</del>	0
	14		paid to or for members (Pai			•			0		
			, other compensation, employe			 . 5 10\		1	15,095		73,502
šes	15							4		4	
Expenses	16a		ional fundraising fees (Part I			•			0		0
훘	b		ndraising expenses (Part IX,			55,472					
ш	17		xpenses (Part IX, column (A)						29,939		67,649
	18	Total ex	penses. Add lines 13–17 (m	ust equal Part IX, o	column (A), line	e 25)		1,1	45,034	8	<u>841,151</u>
	19	Revenu	e less expenses. Subtract lir	e 18 from line 12.				-1	26,123		68,462
Net Assets or	3						Beginn	ing of Curre	nt Year	End of Year	٢
sets	20	Total as	sets (Part X, line 16)					1,2	27,194	1,5	91,140
Ass	21								33,073	·	37,934
Net 	22		ets or fund balances. Subtra	ct line 21 from line	20	•			94,121	1.5	53,206
	art II		nature Block	oc mile 21 mem mile				.,.	0 1, 12 1	1,0	00,200
			y, I declare that I have examined this	roturn including accom	nanying schodulos	and statements	and to th	o bost of my	knowloda	10	
			ect, and complete. Declaration of prep	_				-	_	C	
	20.101, 101	<u> </u>	or, and complete Beside attended of pro-	sarer (eurer uran emeer)	10 20000 011 011 1111		. р. орало	l las any line	ougo.		
Sig											
	gn		0: 1 1 10					Date	:		
He	_		Signature of officer					CEO			
He	_		Daniel R. Mortensen			Pres	ισεπι α				
He	_		Daniel R. Mortensen  Type or print name and title			Pres	ideni a			+	
	ere	Prin	Daniel R. Mortensen	Preparer's	signature	Pres	Date		o [	PTIN	
He Pa	ere		Daniel R. Mortensen Type or print name and title t/Type preparer's name	Preparer's	signature	Pres	Date	е	Check [	if	0
Pa	ere	Suc	Daniel R. Mortensen  Type or print name and title t/Type preparer's name can H Andrews			Pres	Date	e 14/2021	self-emp	if   loyed   P0060594	.9
Pa Pre	id eparer	Sus	Daniel R. Mortensen Type or print name and title t/Type preparer's name			Pres	Date	е	self-emp	if   loyed   P0060594	19
Pa Pre	ere	Sus	Daniel R. Mortensen  Type or print name and title t/Type preparer's name can H Andrews	nting and Bookkee	ping, Inc.		Date	e 14/2021	self-emp	if   loyed   P0060594	9

Form 990 (2020) **Part III** 

Statement of Program Service	Accomplishments
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	Check if Schedule O contains a response or note to any line in this Part III	K
1	Briefly describe the organization's mission:	
	To provide Virginia's K-12 students with the economic knowledge and financial skills needed	
	to thrive in our dynamic economy by providing professional development opportunities to all	
	Virginia K-12 teachers who teach economics and personal finance at no cost to the teachers	
	or school divisions.	
2	Did the organization undertake any significant program services during the year which were not listed on	
		No
	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?	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 revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 305,627 including grants of \$ 0 ) (Revenue \$ 109,875 )	
	Teacher Education - Provide quality professional development (workshops and institutes) and	
	classroom materials to K-12 teachers to enable them to more effectively teach their students the	
	economics and personal finance knowledge and skills needed to be successful in our dynamic	
	economy. As a result of the financial support we receive from our partners, this professional	
	development is provided at no cost to the teachers or their schools. Under challenging	
	circumstances for everyone, due to the pandemic, In FY21, VCEE provided 61 sessions ranging from	
	one hour to 42 hours in length to over 1,275 teachers.	
4b	(Code: ) (Expenses \$ 37,379 including grants of \$ 0 ) (Revenue \$ 125,000 )	
	Revised Online Economics and Personal Finance Course - Project to create and offer and updated	
	"second generation" online course in Economics and Personal Finance for Virginia high school	
	students. The revised online course aligns with Virginia's Standards of Learning curriculum	
	framework, is compatible with various administrative requirements, includes updated data and	
	examples, integrates the six core economic principles, facilitates maximum engagement and	
	interaction, and correlates with components of typical face-to-face courses. The course is	
	offered through partner Virtual Virginia; however, VCEE remains responsible for the content.	
4c	(Code: (Code: 0) (Expenses \$ 42,668 including grants of \$ 0 ) (Revenue \$ 28,254 )	
4c	Stock Market Game - A program for grades 4-12 which provides teachers with a "real world	
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		23-7087052		Pa	ge J
Part	V Checklist of Required Schedules		Tv	es	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		+	es	NO
•	complete Schedule A	1		х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		X	
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			Χ
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			Χ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.	_			.,
c	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part I	<sup>'</sup>    5		+	Χ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If				
	"Yes," complete Schedule D, Part I	6			Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	· · ·   <del>  •</del>	+	+	
'	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7			Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	· · ·   <u>- ·</u>		1	
•	complete Schedule D, Part III	8			Χ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a				
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt				
	negotiation services? If "Yes," complete Schedule D, Part IV	9			Χ
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	) ]	Χ	
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	11	a .	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more		.		.,
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11	b	_	Χ
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	144			Х
٨	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	11	-	+	
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11	Н	x	
6	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		_	$^{\sim}$	Χ
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	··· · <u>··</u>	+	_	
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11	f		Χ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," comple</i>				
	Schedule D, Parts XI and XII	12	a i	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes	5, "			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12	b		Χ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		_		Χ
14a		14	а	_	Χ
b	J J J J J J J J J J J J J J J J J J J				
	fundraising, business, investment, and program service activities outside the United States, or aggregate				v
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14	a	$\dashv$	Χ
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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>	19	.		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13	+	$\dashv$	
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10	,		Χ
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	,		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>	1	寸	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	3		Χ
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			Χ
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20	а		Χ
b	- ,	20	b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or				
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	2			Χ

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Χ
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Χ
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		Χ
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Χ
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Χ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Χ
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Χ
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			.,
••	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		V
<b>L</b>	If "Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		_
20	If"Yes," complete Schedule L, Part IV	28c		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If Yes, complete schedule M	29		^
30	conservation contributions? If "Yes," complete Schedule M	30		~
24	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		X
31 32	Did the organization regulate, terminate, or dissolve and cease operations? If res, complete schedule N, rant r	31		^
32	If "Yes," complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	- 00		
٠.	III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
	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? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V		. 1	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		. 03	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
·	gaming (gambling) winnings to prize winners?	1c	Х	
	2/2	<u>,</u>		

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
_	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	9a		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		<u> </u>
b 10		90		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
р 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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	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			
	excess parachute payment(s) during the year	15		Х
		13		É
40	If "Yes," see instructions and file Form 4720, Schedule N.	40		V
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule Q.			

Part VI

<u>Sect</u>	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year <u>1a</u> 43			
	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 43			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Χ
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	Ť		
<i>1</i> u	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7 a		
b		7b		Х
•		70		^
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:  The governing hedu?	00	~	
a	The governing body?	8a 8b	X	
b		ao	^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			V
0 1	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	١	Χ
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	oae.		NI -
40-	Did the announce tion have lead about any business an affiliate 2	40-	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Χ	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401-	V	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	4.0		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Χ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
40	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Χ	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official.	15a	Х	
b	Other officers or key employees of the organization	15b	Χ	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► VA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 9)	501(c)	)	
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest polynomials and the second conflict of interest polynomials are second conflict.	icy,		
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records	<b>•</b>		
	Daniel R. Mortensen - Virginia Council on Economic Educat (804)-828-1627			
	301 W. Main Street, Richmond, VA 23284			

22.7	n	0-	70	EO	
23-7	U	10 I	ľU	102	

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## Part VII

## Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

(C)

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(12) L. James Borges

**Board Member** 

**Board Member** 

**Board Member** 

(13) D. Oscarlyn Elder

(14) Roger L. Frost

Columbia   Columbia	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle: er an	neck ss pe	rson	e than of is both or/trusted employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
C2   Neil Amin		+			v	v			132 000		
Board Member   0.00   X					^	^			132,000		
3.00		+ <u>-</u>									
Board Member   Co.00   X   C											
Board Member   0.00 X			Х								
(5) Kenneth Blaisdell       3.00         Board Member       0.00 X         (6) J. Alfred Broaddus, Jr.       1.00         Board Member       0.00 X         (7) Philip A. Brooks       3.00         Board Member       0.00 X         (8) Stephanne Strickler Byrd       3.00         Board Member       0.00 X         (9) Bradley H. Gunter       1.00         Board Member       0.00 X         (10) Frank G. Carter       1.00	(4) James W. Dyke	1.00									
Board Member   0.00 X	Board Member	0.00	Χ								
(6) J. Alfred Broaddus, Jr.       1.00         Board Member       0.00 X         (7) Philip A. Brooks       3.00         Board Member       0.00 X         (8) Stephanne Strickler Byrd       3.00         Board Member       0.00 X         (9) Bradley H. Gunter       1.00         Board Member       0.00 X         (10) Frank G. Carter       1.00											
Board Member   0.00 X			Х								
(7) Philip A. Brooks       3.00         Board Member       0.00 X         (8) Stephanne Strickler Byrd       3.00         Board Member       0.00 X         (9) Bradley H. Gunter       1.00         Board Member       0.00 X         (10) Frank G. Carter       1.00											
Board Member   0.00   X			Х								
(8) Stephanne Strickler Byrd         3.00           Board Member         0.00 X           (9) Bradley H. Gunter         1.00           Board Member         0.00 X           (10) Frank G. Carter         1.00		+									
Board Member			Х								
(9) Bradley H. Gunter         1.00           Board Member         0.00 X           (10) Frank G. Carter         1.00			· ·								
Board Member         0.00 X           (10) Frank G. Carter         1.00			X								
(10) Frank G. Carter 1.00			V								
	4/-		Λ.								
Board Member 0.00 A		+	~								
(11) Susan F. Dewey 1.00 1.00											
(11) Susan F. Dewey 1.00			Y								

1.00

0.00

3.00

0.00

1.00

0.00

Χ

Χ

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Part VII	Section A. Officers, Directors, Tri	ustees, Key Em	ploye	ees,			gnes	t Co	ompensated Em	ployees (cor	<u>ıtınu</u>	iea)		
	(A)		(C) Position											
			(do not check more than of box, unless person is both						(D)	(E)		Cation	(F)	
	Name and title	Average hours					or/trust		Reportable compensation	Reportable compensatior	1		ated amo of other	unt
		per week	or Inc	Ins	으	<u>ج</u>	en Hig	Fo	from the	from related			pensatio	'n
		(list any hours for	Individual to or director	titut	Officer	y er	thes	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MIS			nization a	ınd
		related	Individual trustee or director	Institutional trustee		Key employee	t co	_				related	organiza	tions
		organizations below	rust	ī		yee	mpe							
		dotted line)	ee	stee			Highest compensated employee							
(15) Suzanne M.	Gallagher	1.00					Ω		4	$\rightarrow$	+			
Board Member	Gallagriei	0.00	Х											
(40) 01 14		1.00									寸			
Board Member		0.00	Х											
(17) Derwood S.	Chase	1.00									T			
Board Member		0.00	Х											
(18) O. Kate Scot	tt	1.00												
Member ex officio		0.00	Х											
(19) Bryan S. Cra	am	1.00					_							
Board Member		0.00	Χ											
(20) Christopher	Lucy	3.00							<b>7</b> )					
Board Member		0.00	Χ	L	<u></u>			Ĭ			4			
	acker	1.00			ľ									
Board Member		0.00	X								$\dashv$			
(22) A. Fletcher N	Лаngum	3.00					ľ							
Vice Chairman		0.00	X		X						$\dashv$			
(23) Jeffrey R. Le	eopold	3.00		1										
Board Member		0.00	X								4			
(24) James F. La	ne	1.00												
Member ex officio		0.00		-							+			
Board Member	ry-Winter	3.00 0.00	400											
			^	<u> </u>				▶	132,000		0			0
	ontinuation sheets to Part VII, S			•		•		•	132,000		0			0
	ines 1b and 1c).					•		•	132,000		0			0
	r of individuals (including but not li									000 of	<u> </u>			
	ompensation from the organization		, lou c	100	, 0, 1	<b>V</b> 110	10001	vou	more than \$100	,000 01				1
	J.												Yes	
3 Did the organ	nization list any <b>former</b> officer, dire	ector, trustee, ke	v em	ploy	ee,	or h	nighes	st co	ompensated					
	n line 1a? If "Yes," complete Sched										П	3		Χ
	vidual listed on line 1a, is the sum													
•	tion and related organizations grea	•	•						•	ำ				
individual .							•				- 1	4		Х
	on listed on line 1a receive or acci									idual				, ·
• •	rendered to the organization? <i>If "Y</i>	•			•			_			- 1	5		Х
	endent Contractors	es, complete se	neat	are e	101	Suc	n per	301	1			<u> </u>		
	is table for your five highest compe	ensated independ	dent (	conf	tract	tors	that r	ece	eived more than \$	\$100 000 of				
•	on from the organization. Report co									•	ı's ta	ax vea	ar.	
	(A)							Ĭ	(B)			(C)		
	Name and business add	Iress							Description of serv	vices	Co	ompens		
														0
														0
														0
														0
														0
	r of independent contractors (inclu	_	ted to	the	se	iste	d abo	ve)	who received					
more than \$	100,000 of compensation from the	organization I	<u> </u>					0						

Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to any li	ne in this Part	VIII			🔲
			(A) Total rev	enue/	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Gifts, Grants lar Amounts	1a b c d	Federated campaigns	0 0 0 0				
Contributions, Gifts, Grants and Other Similar Amounts	f g	All other contributions, gifts, grants, and similar amounts not included above . 1f 476, Noncash contributions included in				3	
	h	Total. Add lines 1a–1f		71,644			
Program Service Revenue	2a b c	Stock Market Game 611710		9,201 0			
rogram Reve	d e f	All other program service revenue		0			
Δ_	g 3	Total. Add lines 2a–2f	<b>&gt;</b>	9,201			
	4 5	other similar amounts)		9,820 0 0			
	6a b c	Gross rents	0				
	d 7a	Net rental income or (loss)	•	0			
Revenue	b c	other than inventory	0				
Other R	d 8a	Net gain or (loss)	•	18,948			
	b c 9a	See Part IV, line 18	0	0			
	b	See Part IV, line 19 9a  Less: direct expenses 9b  Net income or (loss) from gaming activities	0 0	0			
		Gross sales of inventory, less returns and allowances	0				
er snoe	11a	Net income or (loss) from sales of inventory	de	0			
Miscellaneous Revenue	b c d	All other revenue		0 0 0			
2	e 12	Total Add lines 11a–11d	. <b>&gt;</b>	0 19 613	0	0	0

## Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses				
1	Grants and other assistance to domestic organizations		,		·				
	domestic governments. See Part IV, line 21	0							
2	Grants and other assistance to domestic								
_	individuals. See Part IV, line 22	0							
3	Grants and other assistance to foreign								
•	organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16	0							
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors,	U							
J		132,000	58,861	67 100	5,940				
6		132,000	30,001	67,199	5,940				
6	Compensation not included above to disqualified			•					
	persons (as defined under section 4958(f)(1)) and								
_	persons described in section 4958(c)(3)(B)	0	100 150	07.000	45.505				
7	Other salaries and wages	256,827	183,453	27,809	45,565				
8	Pension plan accruals and contributions (include	_							
	section 401(k) and 403(b) employer contributions)	0							
9	Other employee benefits	54,347	47,849	6,471	27				
10	Payroll taxes	30,328	19,055	7,333	3,940				
11	Fees for services (nonemployees):		· ·						
а	Management	0							
b	Legal	0							
С	Accounting	26,100		26,100					
d	Lobbying	0							
е	Professional fundraising services. See Part IV, line 17	0							
f	Investment management fees	5,492		5,492					
g	Other. (If line 11g amount exceeds 10% of line 25, column								
	(A) amount, list line 11g expenses on Schedule O.)	110,033	110,033	0					
12	Advertising and promotion	3,754	3,754						
13	Office expenses	367		367					
14	Information technology	0							
15	Royalties	0							
16	Occupancy	2,196		2,196					
17	Travel	107	107						
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	0							
19	Conferences, conventions, and meetings	4,001	4,001						
20	Interest	0							
21	Payments to affiliates	0							
22	Depreciation, depletion, and amortization	2,028	0	2,028	0				
23	Insurance	0							
24	Other expenses. Itemize expenses not covered								
	above (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
а	Centers	182,770	182,770						
b	Other program initiatives	9,424	9,424						
С	Telephone	2,169	542	1,627					
d	Printing and postage	2,835	2,024	811					
e	All other expenses Dues, fees and miscellaneous	16,373	9,864	6,509					
25	Total functional expenses. Add lines 1 through 24e	841,151	631,737	153,942	55,472				
26	Joint costs. Complete this line only if the	ŕ	•	·	•				
	organization reported in column (B) joint costs								
	from a combined educational campaign and								
	fundraising solicitation. Check here  if								
	following SOP 98-2 (ASC 958-720)								

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	3,505	1	6,442
	2	Savings and temporary cash investments	319,750	2	363,455
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	_0	5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
SS	8	Inventories for sale or use	0	8	
∢	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 19,931			
	b	Less: accumulated depreciation	4,056	10c	2,028
	11	Investments—publicly traded securities	317,356	11	441,395
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	582,527	15	777,820
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,227,194	16	1,591,140
	17	Accounts payable and accrued expenses	4,345	17	4,334
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
Liabilities	22	Loans and other payables to any current or former officer, director,			
Ħ		trustee, key employee, creator or founder, substantial contributor, or 35%			
jab		controlled entity or family member of any of these persons	0	22	
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	28,728	24	33,600
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete			_
		Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	33,073	26	37,934
es		Organizations that follow FASB ASC 958, check here ▶ X			
and		and complete lines 27, 28, 32, and 33.			
3al	27	Net assets without donor restrictions	492,057	27	643,780
Б	28	Net assets with donor restrictions	702,064	28	909,426
Ę		Organizations that do not follow FASB ASC 958, check here ▶			
Net Assets or Fund Balances		and complete lines 29 through 33.			
Š	29	Capital stock or trust principal, or current funds	0	29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	
As	31	Retained earnings, endowment, accumulated income, or other funds	0	31	
<u>e</u> t	32	Total net assets or fund balances	1,194,121	32	1,553,206
	33	Total liabilities and net assets/fund balances	1,227,194	33	1,591,140

Part	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		909	9,613
2	Total expenses (must equal Part IX, column (A), line 25)	2		841	1,151
3	Revenue less expenses. Subtract line 2 from line 1	3		68	3,462
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		1,194	1,121
5	Net unrealized gains (losses) on investments	5		290	),623
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	7			
	column (B))	10		1,553	3,206
Part	XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
~	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
•	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
С	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on		20	^	
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
Ja	the Single Audit Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Ja		_^
D	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
	required addition addition, explain with our contents of the decombe any steps taken to dilucity such addition.		JU		

Form **990** (2020)

## **Continuation Sheet for Form 990**

Page 1 of 1

Name of the Organization

VIRGINIA COUNCIL ON ECONOMIC EDUCATION

Employer identification number

23-7087052

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensated Employees										
(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average		· `	chec	Т	that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Ins	Officer	Key	Highest compensated employee	Former	compensation from	compensation from related	amount of other
	(list any	vidu direc	Institutional trustee	cer	Key employee	nest ploy	mer	the	organizations	compensation
	hours for	ial tr	onal		ploy	ee con	,	organization	(W-2/1099-MISC)	from the
	related organizations	uste	tru		ее	npei		(W-2/1099-MISC)		organization and related
	below dotted	ф	stee			nsat				organizations
	line)					ed				
(26) Shawn P. McLaughlin	3.00									
Board Member	0.00	Х								
(27) Leigh B. Middleditch, Jr.	1.00									
Board Member	0.00	Х								
(28) E.G. Miller	7.00									_
Secretary/Treasurer	0.00	Χ		Х		4				
(29) Stephanie R. Peters	3.00									
Board Member	0.00	Χ			L					
(30) Katharine M. Bond	1.00									
Board Member	0.00	Χ	4	· _ '	1					
(31) Robert P. Martin	1.00									
Board Member	0.00	X				<b>•</b>				
(32) Keith M. Martin	1.00									
Board Member	0.00	X								
(33) Rob Shinn	3.00	X								
Board Member	0.00	Х								
(34) William A. Casey	1.00									
Board Member	0.00	Х								
(35) Tapan V. Gandhi	1.00	ľ								
Board Member	0.00	Х			_					
(36) Bruce T. Whitehurst	3.00									
Board Member	0.00	Х				-				
(37) Patricia I. Wright	1.00	,,								
Board Member	0.00	Х								
(38) A. Eric Kauders, Jr.	3.00	\ \ \								
Board Member	0.00	Х								
(39) Christopher M Shockley	7.00 0.00	Х		Х						
Chairman (40) Thomas C. Palmer	1.00	_		^						
Board Member	0.00									
(41) Mary G. Morris	1.00	^								
Board Member	0.00	Х								
(42) Gary R. Thomson	1.00									
Board Member	0.00	Х								
(43) Thomas E. Phillips, Jr.	1.00	<u> </u>								
Board Member	0.00	Х								
(44) Jan N. Roche	1.00									
Board Member	0.00	Х								
(45) David W. Mullins	1.00									
Board Member	0.00	Х								
(46) Ozlem Yaylaci	1.00	-	l			1				
Board Member	0.00		L	L	L	L	L			
		-	-	-	_	-	_		-	

#### **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization

Inspection Employer identification number

VIR(	<u> SINI</u>	A COUNCIL ON ECONOMIC EI	DUCATION				23-70	87052	
	rt I								
	orga	anization is not a private foundat	•		-		•		
1	Ш	A church, convention of church	es, or association o	of churches described in	n <b>section</b>	170(b)(1)(	(A)(i).		
2		A school described in <b>section</b> '	170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990 or 99	90-EZ).)			
3		A hospital or a cooperative hos	pital service organiz	zation described in <b>sec</b>	tion 170(l	o)(1)(A)(iii	i).		
4		A medical research organization hospital's name, city, and state	•	nction with a hospital c	lescribed	in <b>section</b>	<b>170(b)(1)(A)(iii).</b> En	ter the	
5		An organization operated for the section 170(b)(1)(A)(iv). (Com	e benefit of a colleg	ge or university owned	or operate	ed by a go	vernmental unit desc	cribed in	
6		A federal, state, or local govern	nment or governmer	ntal unit described in <b>s</b> e	ection 170	(b)(1)(A)(	v).		
7	Χ	An organization that normally redescribed in <b>section 170(b)(1)</b>			m a gove	rnmental ι	unit or from the gene	ral public	
8		A community trust described in	section 170(b)(1)(/	A)(vi). (Complete Part	II.)				
9		An agricultural research organi or university or a non-land-grar university:							
10		An organization that normally receipts from activities related to support from gross investment acquired by the organization af	to its exempt function income and unrelated	ons—subject to certain ed business taxable in	exception come (les	s, and (2) s section (	no more than 33 1/3 511 tax) from busine	s% of its	
11		An organization organized and	operated exclusive	ly to test for public safe	ety. See <b>s</b> e	ection 509	0(a)(4).		
12		An organization organized and of one or more publicly support Check the box in lines 12a thro	ted organizations de	escribed in section 509	<b>9(a)(1)</b> or s	section 50	9(a)(2). See section	n 509(a)(3).	
a b	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.								
		control or management of the organization(s). You must o	ne supporting organi	ization vested in the sa					
С		Type III functionally integr its supported organization(s						rated with,	
d	l	Type III non-functionally in that is not functionally integr requirement (see instruction	ated. The organizat	tion generally must sati	isfy a distr	ibution red	quirement and an att		
е		Check this box if the organiz functionally integrated, or Ty	zation received a wr	itten determination fror	m the IRS	that it is a		e III	
f		Enter the number of supported	•		-				0
g		Provide the following informatio	n about the support	ed organization(s).					
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)	e
					Yes	No			
( <b>A</b> )									
(B)									
(C)									
(D)									
(E)									
Γota	<u> </u>						0		0
							ı Ul		· · ·

Page 2

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	(e) 2020	<b>(f)</b> Total
1 2	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,252,769	946,567	1,049,330	986,594	871,644	5,106,904
2	organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 5	Total. Add lines 1 through 3	1,252,769	946,567	1,049,330	986,594	871,644	5,106,904
6	Public support. Subtract line 5 from line 4						5,106,904
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	1,252,769	946,567	1,049,330	986,594	871,644	5,106,904
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	10,248	10,293	11.953	11,399	9,820	53,713
9	Net income from unrelated business activities, whether or not the business is regularly carried on		.,	,	,	.,	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
11	<b>Total support.</b> Add lines 7 through 10						5,160,617
12	Gross receipts from related activities, etc. (s	,				12	
13	First 5 years. If the Form 990 is for the org organization, check this box and stop here						•
	ction C. Computation of Public Su	• •		(6)		44	00.000/
14 15	Public support percentage for 2020 (line 6, Public support percentage from 2019 Scheo	٠,٠	•	· //		14 15	98.96% 98.92%
	33 1/3% support test—2020. If the organizand stop here. The organization qualifies a	zation did not check	the box on line 13	, and line 14 is 33	1/3% or more, ched	ck this box	
b	33 1/3% support test—2019. If the organize box and stop here. The organization qualifi			•			
17a	10%-facts-and-circumstances test—202 10% or more, and if the organization meets Part VI how the organization meets the fact organization	the facts-and-circur s-and-circumstance	nstances test, che s test. The organiz	ck this box and <b>sto</b> ation qualifies as a	p here. Explain in publicly supported	I	<b>&gt;</b> _
b	10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization in Part VI how the organization meets the facorganization.	neets the facts-and- acts-and-circumstan	circumstances test ces test. The organ	t, check this box an nization qualifies as	nd <b>stop here</b> . Expl s a publicly support	ain ed	<b>.</b> [
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		
	instructions						

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support	<u>yu.uu.u</u>		, p			
	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees		, ,	, ,	, ,	, ,	
	received. (Do not include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
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						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						
	line 6.)						0
	ction B. Total Support		(1) 0047	( ) 0040	/ I) 0040	( ) 0000	(D. T. ) .
_	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						0
	royalties, and income from similar sources						0
D	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						0
_	Add lines 10a and 10b	0	0	0	0	0	0
	Net income from unrelated business		U	U	U	0	0
11	activities not included in line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						
-	loss from the sale of capital assets						
	(Explain in Part VI.)						0
13	Total support. (Add lines 9, 10c, 11,						
. •	and 12.)	0	0	0	0	0	0
14	First 5 years. If the Form 990 is for the orga						
	organization, check this box and <b>stop here</b> .			•	, , , ,		▶□
Sec	ction C. Computation of Public Sup	port Percenta	qe				<del></del>
15	Public support percentage for 2020 (line 8, co			(f))		15	0.00%
16	Public support percentage from 2019 Schedu	ule A, Part III, line 1	5			16	0.00%
Sec	ction D. Computation of Investmen						
17	Investment income percentage for 2020 (line	: 10c, column (f), di	vided by line 13, c	olumn (f))		17	0.00%
18	Investment income percentage from 2019 So	chedule A, Part III, I	ine 17			18	0.00%
19a	33 1/3% support tests—2020. If the organize	zation did not checl	the box on line 1	4, and line 15 is m	ore than 33 1/3%,	and line 17 is	
	not more than 33 1/3%, check this box and ${\bf s}$	-			-		▶ 🔝
b	33 1/3% support tests—2019. If the organiz						
	line 18 is not more than 33 1/3%, check this	-	_				=
20	Private foundation. If the organization did n	ot check a box on I	ine 14, 19a, or 19	b, check this box a	nd see instructions	8	

#### **Supporting Organizations** Part IV

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

#### **Section A. All Supporting Organizations**

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? 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?
- 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
0.5		
3c		
30		
4a		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
7		
9b		
7.2		
9с		
7.0		
10a		
.00		
10b		
orm 990 or	990-F <i>7</i>	2020

Part I	V Supporting Organizations (continued)			
-			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
0 1	detail in Part VI.	11c		<u> </u>
Section	on B. Type I Supporting Organizations		Vaa	Na
4	Did the approximate heady assessment of the approximate adv. officers extinct in the in-official constitution and approximate forms		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2				
	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	on C. Type II Supporting Organizations		•	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Cooti	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	NO
'	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 in 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			
<u> </u>	supported organizations played in this regard.	3		
	on E. Type III Functionally Integrated Supporting Organizations			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr The organization satisfied the Activities Test. Complete line 2 below.	uction	<b>s</b> ).	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instruct	ions).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in 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			
	<b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	20		
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? <i>If "Yes" or "No," provide details in <b>Part VI</b>.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Ves" describe in Part VI the role played by the organization in this regard	3h		

Type III Non-Functionally integrated 509(a)(3) Supporting C			
1 Check here if the organization satisfied the Integral Part Test as a qualifying	•		•
instructions. All other Type III non-functionally integrated supporting orga Section A - Adjusted Net Income	inization	ns must complete Sections (A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		(οριιοπαι)
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	0	0
5 Depreciation and depletion	5	<u> </u>	
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	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
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>b</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	0	0
e Discount claimed for blockage or other factors			
(explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 0.035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		0
2 Enter 0.85 of line 1.	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
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		0
7 Check here if the current year is the organization's first as a non-functiona	lly integ	rated Type III supporting of	organization (see
instructions).			

Schedul	e A (Form 990 or 990-EZ) 2020 VIRGINIA COUNCIL ON ECON	IOMIC EDUCATION	2	3-7087052 Page <b>7</b>
Part '	Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required—	provide details in <b>Part V</b> i	()	
6	Other distributions (describe in Part VI). See instructions.			
7	<b>Total annual distributions.</b> Add lines 1 through 6.			0
8	Distributions to attentive supported organizations to which t	he organization is respor	nsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2020 from Section C, line 6			0
10	Line 8 amount divided by line 9 amount	T		0.000
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			0
2	Underdistributions, if any, for years prior to 2020			
	(reasonable cause required—explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2020			
a	From 2015			
b	From 2016			
C	From 2017			
d	From 2018			
е	From 2019			
f	<b>Total</b> of lines 3a through 3e	0		
g	Applied to underdistributions of prior years		0	
<u>h</u> _	Applied to 2020 distributable amount			0
i	Carryover from 2015 not applied (see instructions)			
<u>i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	0		
4	Distributions for 2020 from			
	Section D, line 7: \$ 0			
a	Applied to underdistributions of prior years		0	
<u>b</u>				0
<u>c</u>		0		
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI</b> . See instructions.		0	
6	Remaining underdistributions for 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain			^
	in Part VI. See instructions.			0
7	Excess distributions carryover to 2021. Add lines 3j	_		
	and 4c. Breakdown of line 7:	0		
8	Excess from 2016			
a	Excess from 2017			
b	E ( 0040			
<u>c</u>	Excess from 2019			
<u>u</u> e				
E				

Page 8

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 D (Form 990)

Department of the Treasury

Internal Revenue Service

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name (	e or the organization	Employer Identification number
<u>VIRG</u>	GINIA COUNCIL ON ECONOMIC EDUCATION	23-7087052
Part	rt I Organizations Maintaining Donor Advised Funds or Other Similar F	unds or Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	6.
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	in donor advised
	funds are the organization's property, subject to the organization's exclusive legal contr	
6	Did the organization inform all grantees, donors, and donor advisors in writing that gran	
-	only for charitable purposes and not for the benefit of the donor or donor advisor, or for	
	conferring impermissible private benefit?	
Darf	rt II Conservation Easements.	
rait	Complete if the organization answered "Yes" on Form 990, Part IV, line	7
		<i>1</i> .
1	Purpose(s) of conservation easements held by the organization (check all that apply).	ion of a biotonically increased and and
		ion of a historically important land area
	Protection of natural habitat Preservat	ion of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribut	ion in the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а		<b>2a</b>
b		
c		
d		
	historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or te	
	the tax year •	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspectio	n, handling of
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing	g conservation easements during the year
	•	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing cor	nservation easements during the year
	<b>▶</b> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements	s of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue	ue and expense statement and
	balance sheet, and include, if applicable, the text of the footnote to the organization's fire	nancial statements that describes the
	organization's accounting for conservation easements.	
Part	rt III Organizations Maintaining Collections of Art, Historical Treasures,	or Other Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	3.
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its rever	nue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, educa-	ation, or research in furtherance of
	public service, provide in Part XIII the text of the footnote to its financial statements that	
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue	
	works of art, historical treasures, or other similar assets held for public exhibition, education	
	public service, provide the following amounts relating to these items:	•
	(i) Revenue included on Form 990, Part VIII. line 1	▶ \$
	(i) Revenue included on Form 990, Part VIII, line 1	<b>&gt;</b> \$
2	If the organization received or held works of art, historical treasures, or other similar as:	
-	following amounts required to be reported under FASB ASC 958 relating to these items	— · · · · · · · · · · · · · · · · · · ·
а	B	
	Assets included in Form 990. Part X	▶ \$

Sched	ule D (Form 990) 2020 VIRGINIA COUNCIL C	N ECONOMIC I	EDUCATIO	N			23-70870	152		Page 2
Part	<b>III</b> Organizations Maintaining Coll	ections of Ar	t, Histori	cal Trea	asures, or O	ther Si	milar Assets	(conti	nued)	
3	Using the organization's acquisition, access	sion, and other	records, ch	neck any	of the following	g that m	ake significant u	se of it	S	
	collection items (check all that apply):									
а	Public exhibition		d	Loan or	exchange prog	gram				
b	Scholarly research		е	Other						
С	Preservation for future generations									
4	Provide a description of the organization's XIII.	collections and	explain ho	w they fu	rther the organ	ization's	s exempt purpos	e in Pa	art	
5	During the year, did the organization solici assets to be sold to raise funds rather than							∏ Ye	[	No
Dowt			as part	or the org	janization s coi	iection:	· · · · ·	<u> </u>	<i>;</i> 5	NO
Part	Complete if the organization answ 990, Part X, line 21.	wered "Yes" o						on Foi	rm	
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?							Ye	es 🔃	No
b	If "Yes," explain the arrangement in Part X	III and complete	the follow	ing table:	:					
							Ar	nount		
C	Beginning balance					1c				0
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				0
2a	Did the organization include an amount or						-		es X	No
b	If "Yes," explain the arrangement in Part X	III. Check here i	f the expla	nation ha	as been provide	ed on Pa	art XIII			
Part	V Endowment Funds.									
	Complete if the organization ans	wered "Yes" o	n Form 99	90, Part	IV, line 10.					
		(a) Current year	(b) Prior	-	(c) Two years ba	ack (d	) Three years back	(e) Fo	our years	back
1a	Beginning of year balance	582,527		628,902	584,	459	511,673		8	6,798
b	Contributions	5,880		10,361	24,	,093	47,817		39	8,558
С	Net investment earnings, gains,									
	and losses	189,413		-56,736	20,	,350	41,601	<u> </u>	3	8,329
d	Grants or scholarships							<u> </u>		
е	Other expenditures for facilities						40.000			0.040
_	and programs						16,632		1	2,012
Ť	Administrative expenses	777.000		500 507	200	000	504.450	<u> </u>		4 070
g	End of year balance	777,820		582,527	628,		584,459	<u> </u>	51	1,673
2	Provide the estimated percentage of the c			ie ig, co	iumn (a)) neid	as:				
a	Board designated or quasi-endowment  Permanent endowment	100%	%							
b C	Term endowment ▶ %	100%								
C	The percentages on lines 2a, 2b, and 2c s	hould equal 100	0/2							
3a	Are there endowment funds not in the pos	•		that are	held and admi	nistered	I for the			
ou	organization by:		gariization	triat arc	ricia aria adirii	motorco	TIOI THE	ľ	Yes	No
	(i) Unrelated organizations							3a(i)	X	
	(ii) Related organizations							3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organ							3b		X
4	Describe in Part XIII the intended uses of the		•							
Part		nt.				See Fo	orm 990, Part I	X, line	10.	
	Description of property	(a) Cost or oth	ner basis	(b) Cost o	or other basis	<b>(c)</b> Ac	cumulated		ook valu	е
1a	Land		0		0					0
b	Buildings		0		0		0			0
C	Leasehold improvements		0		0		0			0
d	Equipment	1	0		16,547		14,519			2,028
е	Other	1	0		3,384		3,384			0

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

2,028

Part VII	Investments—Other Securities.  Complete if the organization answered	"Yes" on Form 990	Part IV line 11h See Form 9	990 Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	luation:
(1) Financia	al derivatives	0	Cost of Cha-of-year h	narket value
	held equity interests	0		
/ <b>C</b> \				
/ <b>C</b> \				
(G)				
(H)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	0		
Part VIII	Investments—Program Related. Complete if the organization answered	"Yes" on Form 990	Part IV line 11c See Form 9	990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of va	luation:
(1)			Cost or end-of-year n	narket value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 13.) . ►	0		
Part IX	Other Assets.			
	Complete if the organization answered	<u>"Yes" on Form 990,</u>	Part IV, line 11d. See Form 9	990, Part X, line 15.
	(a) Descr	•		(b) Book value
	ment Funds Held at The Community Foundation	on		777,820
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
<u>(8)</u> (9)				
	umn (b) must equal Form 990, Part X, col. (B) I	ine 15 )		777,820
Part X	Other Liabilities.	<i>inc 10.)</i>		777,020
I alt A	Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11e or 11f. See	Form 990, Part X,
	line 25.		Т	#N 5 . · ·
1. (1) Fadara	. , , ,	tion of liability		(b) Book value
_ ` '	al income taxes			0
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col. (B) I	ine 25.)		0
	or uncertain tax positions. In Part XIII, provide the te			
•	's liability for uncertain tax positions under FASB A		•	

	Reconciliation of Revenue per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part I		122		
1	Total revenue, gains, and other support per audited financial statements			1	1,209,744
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1	1,209,744
		ا ءء ا	101 211		
a	Net unrealized gains (losses) on investments	2a	101,211		
b		2b	15,000		
C	Recoveries of prior year grants	2c	400 440		
d	Other (Describe in Part XIII.)	2d	189,412	0.0	205 022
e	Add lines 2a through 2d			2e	305,623
3	Subtract line 2e from line 1	i · · · ı		3	904,121
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		F 400		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	5,492		
b	Other (Describe in Part XIII.)	4b			<b>-</b> 400
_ C	Add lines 4a and 4b			4c	5,492
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).			5	909,613
Par	Reconciliation of Expenses per Audited Financial Statement			Return.	
	Complete if the organization answered "Yes" on Form 990, Part				
1	Total expenses and losses per audited financial statements			1	850,659
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities	2a	15,000		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	15,000
3	Subtract line 2e from line 1	i · · .		3	835,659
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	5,492		
b	Other (Describe in Part XIII.)	4b			
	Add lines <b>4a</b> and <b>4b</b>			4c	5,492
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	841,151
	XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P				4; Part X, line
2; Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro	vide an	y additional informa	ition.	
Part 2	XI Line 2d The other difference in revenue is the \$189,412 gain in the value of the	)			
∟ndo	owment Account.				
∟ndo	owment Account.				
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Schedule D (For		VIRGINIA COUNCIL ON ECONOMIC EDUCATION	23-7087052	Page <b>5</b>
Part XIII	Suppleme	ental Information (continued)		
		, ,		

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

2020
Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

VIRGINIA COUNCIL ON ECONOMIC EDUCATION 23-7087052 Form 990, Part III, Line 4d: Program Service Expenses: 28,136, Grants and allocations: 0, Revenue: 32,000 The Governor"s Challenge in Economics and Personal Finance - This is a statewide competition for high school students held in conjunction with the Governor's Office. An online competition is initially held in three divisions - Personal Finance, Economics and Advanced Economics. In FY21 more than 1,500 students participated in the Governor's Challenge statewide. Form 990, Part III, Line 4d: Program Service Expenses: 217,927, Grants and allocations: 0, Revenue: 61,508 Additional programs include serving as a resource for teachers and local school divisions in the area of economic and financial education as well as providing other programs which can assist teachers in teaching these concepts to students (e.g. Reading Makes Cents and Virginia Reads One Book) . VCEE also provides Economic Educator Awards acknowledging outstanding teachers, creative lessons written by them, and providing mini-grants to support their efforts in the classroom to promote economic and financial literacy. Form 990, Part VI, Section B, Line 11b: Prior to the filing of the Form 990, the President sends an electronic copy to all board members for their review. Form 990, Part VI, Section B, Line 12c: Board members are asked to submit their conflict of interest disclosure forms annually. The forms are reviewed and monitored by the President and Governance Committee chair in accordance with the policy. Form 990, Part VI, Section B, Line 15a: On an annual basis the executive committee, acting on behalf of the Board of Directors, reviews the performance and compensation of the President. Form 990, Part VI, Section C, Line 19: All governing documents, conflict of interest policy statements and financial statements are made available to the public upon request. Form 990, Part IX, Line 11g: Of the \$110,033 in other fees for services, \$58,033 was paid to consultants to teach workshops on economic education and to create teh curriculum in the revised online economics and personal finance course and \$52,000 was paid to a communications

consultant. Forms 1099-NEC were issued to any individuals that were paid \$600 or more during

Schedule O (Form 990 or 990-EZ) 2020	Page	2
Name of the organization	Employer identification number	
VIRGINIA COUNCIL ON ECONOMIC EDUCATION	23-7087052	
the calendar year.		