### EXTENDED TO MAY 16, 2022

Form **990** 

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

Department of the Ireasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, and ending JUN 30, 2021 Open to Public

GALIFORNIA SCHOOL BOARDS ASSOCIATION   Double pushess as   Double pushes   Double pu	<b>B</b> c	Check if pplicabl	C Name of organization	D Employer identif	ication number
Comparison		Addre	CALTFORNIA SCHOOL BOARDS ASSOCIATION		
Sample   Number of vote state (or P.0.1 bots if mails not delivered to street address)   Boom/suite   E Telephone number   251 BARCAND BOULEVARD		□Name			192
		□Initial			
City or town, state or province, country, and ZiP or foreign postal code   G. Gessarrespeas   18,802,393.		Final	3251 BEACON BOILEVARD		
Contributions and grants (Part VIII, column (A), lines 13, 4, and 70)   Program sorcior revenue (Part VIII, column (A), lines 29, 10   Investment income (Part VIII, column (A), lines 29, 11   Investment income (Part VII		termin	-	G Gross receipts \$	18,802,393.
SAME AS C ABOVE			WEST SACRAMENTO, CA 95691-3531	H(a) Is this a group r	eturn
Tax-exempts tastus:		tion		for subordinate	s? Yes X No
J Website:   MWW. CSBA. ORG		pendi	SAME AS C ABOVE		included? Yes No
Form of organization:   X    Corporation   Trust   Association   Other   L Year of formation: 1952   M State of legal domicitie: CA					
Part   Summary					
Briefly describe the organization's mission or most significant activities: PROMOTING K-1.2 PUBLIC EDUCATION SUCCESS THROUGH AGGRESSIVE ADVOCACY AND EFFECTIVE SCHOOL BOARD				Year of formation: 1952	M State of legal domicile: CA
SUCCESS THROUGH AGGRESSIVE ADVOCACY AND EFFECTIVE SCHOOL BOARD	P			ור צ_12 מוום דר	T EDITON TON
Notifice of independent voting framitises by the governing framitises of the governing framitises of the governing framitises framitises framitises framitises of the governing framitises framitises of the governing framitises framitises of the governing framitises fra	ance	'	SUCCESS THROUGH AGGRESSIVE ADVOCACY AND EFFE	CTIVE SCHOOL	BOARD
Notifice of independent voting framitises by the governing framitises of the governing framitises of the governing framitises framitises framitises framitises of the governing framitises framitises of the governing framitises framitises of the governing framitises fra	ernő.	2	Check this box  if the organization discontinued its operations or disposed of the continued its operations.	more than 25% of its net a	
Notifice of independent voting framitises by the governing framitises of the governing framitises of the governing framitises framitises framitises framitises of the governing framitises framitises of the governing framitises framitises of the governing framitises fra	Š	I			•
B Net unrelated business taxable income from Form 990-T, Part I, line 11   To   O .	۵	1			
B Net unrelated business taxable income from Form 990-T, Part I, line 11   To   O .	ies				
B Net unrelated business taxable income from Form 990-T, Part I, line 11   To   O .	ΞΞ				
Second   Prior Year   Current Year   3.58 x, 767   1, 280 x, 013   1, 280 x, 013 x, 013   1, 280 x, 013	Ac				
8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to no for members (Part IX, column (A), lines 1-3) 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 1e) 16 Professional fundraising fees (Part IX, column (A), line 1e) 17 Other expenses (Part IX, column (A), line 11e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Total liabilities (Part X, line 26) 23 Total liabilities (Part X, line 26) 24 Total liabilities (Part X, line 26) 25 Net assets or fund balances. Subtract line 21 from line 20 26 Total liabilities (Part X, line 26) 27 Total assets (Part X, line 26) 28 Net assets or fund balances. Subtract line 21 from line 20 29 Total liabilities (Part X, line 26) 30 Total expenses (Part X, line 26) 31 Total liabilities (Part X, line 26) 32 Net assets or fund balances. Subtract line 21 from line 20 31 Total liabilities (Part X, line 26) 32 Net assets or fund balances. Subtract line 21 from line 20 32 Signature Block 33 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.  34 PrintType preparer's name 35 PrintType preparer's name 36 PrintType preparer's name 36 PrintType preparer's name 37 PrintType preparer's name 38 PrintType preparer's name 39 PrintType preparer's name 30 PrintType preparer's name 30 PrintType preparer's name		d	Net unrelated business taxable income from Form 990-1, Part I, line 11	1	
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), lines 1-3) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 17 Other expenses (Part IX, column (A), lines 11-11d, 11f-24e) 18 Total fundraising expenses (Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 20 Total assets (Part X, line 26) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 Signature Block  14		٥	Contributions and grants (Part VIII. line 1h)		
1 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	nue	1			
1 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	eve		•		
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)   17,671,219   18,147,572     13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)   0	ď	1			
13   Grants and similar amounts paid (Part IX, column (A), lines 1-3)   0 .		1			18,147,572.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)   10,776,333.   12,142,672.     16a Professional fundraising fees (Part IX, column (A), line 11e)   0.   0.     17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)   6,425,440.   4,279,018.     18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   17,201,773.   16,421,690.     19 Revenue less expenses. Subtract line 18 from line 12   469,446.   1,725,882.     20 Total assets (Part X, line 16)   19,672,877.   20,580,834.     21 Total liabilities (Part X, line 26)   4,677,709.   3,865,260.     22 Net assets or fund balances. Subtract line 21 from line 20   14,995,168.   16,715,574.     Part II   Signature Block   14,995,168.   16,715,574.     Part II   Signature of officer   Date     VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR   Date     VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR   Date     VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR   Firm's name   GILBERT CPAS   GILBERT CPAS   Firm's address   2880 GATEWAY OAKS DR, STE 100     SaCRAMENTO, CA 95833   Phone no.916-646-6464				0.	-
16a Professional fundraising fees (Part IX, column (A), line 11e)   0 .		14	Benefits paid to or for members (Part IX, column (A), line 4)	1	
Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 A 677, 709.  3 Revenue less expenses. Subtract line 21 from line 20  25 Net assets or fund balances. Subtract line 21 from line 20  26 Net assets or fund balances. Subtract line 21 from line 20  27 Part II Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Signature of officer  VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR  Type or print name and title  Print/Type preparer's name  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  Firm's name  GILBERT CPAS  Firm's address  2880 GATEWAY OAKS DR, STE 100  SACRAMENTO, CA 95833  Phone no. 916-646-6464	es	I			
Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 A 677, 709.  3 Revenue less expenses. Subtract line 21 from line 20  25 Net assets or fund balances. Subtract line 21 from line 20  26 Net assets or fund balances. Subtract line 21 from line 20  27 Part II Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Signature of officer  VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR  Type or print name and title  Print/Type preparer's name  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  Firm's name  GILBERT CPAS  Firm's address  2880 GATEWAY OAKS DR, STE 100  SACRAMENTO, CA 95833  Phone no. 916-646-6464	ens		<b>A</b>	0.	0.
Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 A 677, 709.  3 Revenue less expenses. Subtract line 21 from line 20  25 Net assets or fund balances. Subtract line 21 from line 20  26 Net assets or fund balances. Subtract line 21 from line 20  27 Part II Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Signature of officer  VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR  Type or print name and title  Print/Type preparer's name  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  Firm's name  GILBERT CPAS  Firm's address  2880 GATEWAY OAKS DR, STE 100  SACRAMENTO, CA 95833  Phone no. 916-646-6464	Ϋ́	1		6 405 440	4 070 010
19   Revenue less expenses. Subtract line 18 from line 12   469,446.   1,725,882.	_				
Beginning of Current Year   End of Year   19,672,877   20,580,834   19,672,877   20,580,834   19,672,877   20,580,834   19,677,709   3,865,260   14,995,168   16,715,574   14,995,168   1					
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Signature of officer  VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR Type or print name and title  Print/Type preparer's name  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  Firm's name  GILBERT CPAS  Firm's address  Sacramento, CA 95833  Phone no.916-646-6464	<u>_ s</u>		Hevenue less expenses. Subtract line 18 from line 12	· · · · · · · · · · · · · · · · · · ·	
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Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Signature of officer  VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR Type or print name and title  Print/Type preparer's name  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  Firm's name  GILBERT CPAS  Firm's address  Sacramento, CA 95833  Phone no.916-646-6464	Ass. I Bal	21			
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true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Sign Here  VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR Type or print name and title  Print/Type preparer's name JENNIFER Z IWATA JENNIFER Z IWATA Firm's name Firm's name SILBERT CPAS Firm's address SACRAMENTO, CA 95833  Phone no.916-646-6464	Pa				
Sign Here  VERNON M. BILLY, CEO/EXECUTIVE DIRECTOR Type or print name and title  Print/Type preparer's name JENNIFER Z IWATA Preparer Use Only  SACRAMENTO, CA 95833  Date  Date  Date  Check PTIN  O1/20/22  Self-employed PO1310188  Firm's Rame Date  O1/20/22  Firm's EIN Firm's EIN Firm's EIN Phone no.916-646-6464	Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the best of n	ny knowledge and belief, it is
WERNON M. BILLY, CEO/EXECUTIVE DIRECTOR  Type or print name and title  Print/Type preparer's name  JENNIFER Z IWATA  Preparer  Firm's name  GILBERT CPAS  Firm's address  2880 GATEWAY OAKS DR, STE 100  SACRAMENTO, CA 95833  Phone no.916-646-6464	true,	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	parer has any knowledge.	
WERNON M. BILLY, CEO/EXECUTIVE DIRECTOR  Type or print name and title  Print/Type preparer's name  JENNIFER Z IWATA  Preparer  Firm's name  GILBERT CPAS  Firm's address  2880 GATEWAY OAKS DR, STE 100  SACRAMENTO, CA 95833  Phone no.916-646-6464					
Type or print name and title  Print/Type preparer's name  Print/Type preparer's name  JENNIFER Z IWATA  Preparer  Firm's name  GILBERT CPAS  Firm's address  2880 GATEWAY OAKS DR, STE 100  SACRAMENTO, CA 95833  Phone no.916-646-6464				Date	
Print/Type preparer's name  JENNIFER Z IWATA  Preparer  Use Only  Print/Type preparer's name  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  JENNIFER Z IWATA  Date  01/20/22 if self-employed  Firm's name  Firm's EIN  68-0037990  Phone no.916-646-6464	Her	е			_
Paid JENNIFER Z IWATA JENNIFER Z IWATA 01/20/22				Date Check	I PTIN
Preparer   Firm's name   GILBERT CPAS   Firm's EIN   68-0037990   Use Only   Firm's address   2880 GATEWAY OAKS DR, STE 100   SACRAMENTO, CA 95833   Phone no.916-646-6464	Pair	4		OHOOK L	
Use Only Firm's address 2880 GATEWAY OAKS DR, STE 100 SACRAMENTO, CA 95833 Phone no. 916-646-6464				Firm's FIM	68-0037990
SACRAMENTO, CA 95833 Phone no. 916 - 646 - 6464				I IIIII 2 FIN	00 0007770
		<b>.</b>		Phone no. 91	.6-646-6464
	May	/ the II		1	

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:  BOARDS OF EDUCATION ARE ENTRUSTED BY THEIR DIVERSE COMMUNITIES TO
	ENSURE THAT A HIGH QUALITY EDUCATION IS PROVIDED TO EACH STUDENT. CSBA
	PROMOTES SUCCESS FOR ALL STUDENTS BY DEFINING AND DRIVING THE PUBLIC
	EDUCATION AGENDA AND STRENGTHENING SCHOOL BOARD GOVERNANCE AT THE
2	Did the organization undertake any significant program services during the year which were not listed on the
_	V V.
	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
3	7 71 0
4	If "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	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.
	2 400 607
44	(Code: ) (Expenses \$ 3,400,687. including grants of \$ ) (Revenue \$ 4,906,736. POLICY AND GOVERNANCE TECHNOLOGY SERVICES PROVIDE SUPPORT TO SCHOOL
	BOARDS AND ADMINISTRATORS BY ASSISTING THEM WITH DEVELOPMENT,
	MANAGEMENT, AND MAINTENANCE OF LOCAL POLICIES AND BOARD MEETING AGENDAS
	AND MATERIALS USING CSBA'S GAMUT SOFTWARE APPLICATION PLATFORM THROUGH
	VARIOUS MODULES THAT INCLUDE POLICY, POLICY PLUS, AND MEETINGS.
	VINCTOOD HODGED THEIR INCOORD FORTING THOSE THOS
	THE GAMUT POLICY MODULE GIVES EASY ACCESS TO CSBA SAMPLE POLICIES,
	REGULATIONS AND BYLAWS, PERTINENT LAWS, AND OTHER RESOURCES THAT ARE
	UPDATED CONTINUOUSLY THROUGHOUT THE YEAR. THE GAMUT POLICY PLUS MODULE
	PROVIDES AN ONLINE HOSTING PLATFORM FOR BOARD POLICIES WITH DIRECT
	UPDATING, EDITING, AND POSTING CAPABILITIES. THE GAMUT MEETINGS MODULE
	IS A PAPERLESS BOARD MEETING SERVICE WHICH ELIMINATES THE NEED FOR HARD
4b	(Code: ) (Expenses \$ 3,316,431. including grants of \$ ) (Revenue \$ 2,082,274.
	ASSOCIATION EDUCATION: CSBA PROVIDES TRAINING, SUPPORT, AND RESOURCES
	TO GOVERNING BOARDS AND SUPERINTENDENTS TO MAXIMIZE THEIR EFFECTIVENESS
	IN CARRYING OUT THEIR CRITICAL LEADERSHIP FUNCTIONS. THE TRAINING
	OPPORTUNITIES PROVIDED TO CSBA MEMBERS INCLUDE THE FOLLOWING AREAS:
	TRAINING FOR NEW BOARD MEMBERS; EFFECTIVE GOVERNANCE AND LEADERSHIP;
	BOARD ROLES AND RESPONSIBILITIES; STUDENT BOARD MEMBER TRAINING; STATE
	AND NATIONAL TRENDS IN EDUCATION; AND EDUCATION POLICY AND RESEARCH
	REGARDING STUDENT ACHIEVEMENT. THESE TRAININGS ARE DELIVERED THROUGH
	CONFERENCES, CERTIFICATE PROGRAMS, WORKSHOPS, AND INSTITUTES, AND
	TARGET THE BOARD MEMBER, SUPERINTENDENT, AND EXECUTIVE ASSISTANT
	AUDIENCES. CSBA'S ANNUAL EDUCATION CONFERENCE DRAWS NEARLY 5,000
	PARTICIPANTS, INCLUDING ATTENDEES, PRESENTERS, THOUGHT LEADERS,
4c	(Code:) (Expenses \$4 , 334 , 787 • _ including grants of \$) (Revenue \$)
	GOVERNMENTAL RELATIONS: ADVOCATES ON BEHALF OF PUBLIC ELEMENTARY AND
	SECONDARY EDUCATION BEFORE THE CALIFORNIA STATE LEGISLATURE AND U.S.
	CONGRESS AND OTHER STATE AND FEDERAL GOVERNMENTAL ENTITIES. THE
	DEPARTMENT PROVIDES STAFF SUPPORT TO CSBA'S LEGISLATIVE COMMITTEE TO
	TAKE ACTIVE POSITIONS ON PENDING LEGISLATION AND PROMOTE THE ENACTMENT
	OF LEGISLATION FAVORABLE TO THE INTERESTS OF STUDENTS, SCHOOL DISTRICTS
	AND COUNTY OFFICES OF EDUCATION. GOVERNMENTAL RELATIONS ENGAGES IN NEGOTIATIONS ON THE STATE BUDGET TO MAXIMIZE RESOURCES AVAILABLE FOR
	K-12 PUBLIC EDUCATION AND PRIORITIZE THE USE OF THOSE RESOURCES.
	V IN I OPPIC PROCUITON WAS LUTOVILLED INF ORE OL IMORE VEROCUCER.
۸4	Other program services (Describe on Schedule O.)
÷u	(Expenses \$ 3,319,900 • including grants of \$ ) (Revenue \$ 9,753,294 •)
4e	Total program service expenses ► 14,371,805.
70	Total program conviou expenses = - 7 3 / 2 / 0 0 0 0

# Form 990 (2020) CALIFORNIA SCHOOL BOARDS ASSOCIATION 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)?			x
2	If "Yes," complete Schedule A	2	Х	1
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	Ė		
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			7.7
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			X
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	х	
122	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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		X
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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		<del></del>
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
			000	(0000)

# Form 990 (2020) CALIFORNIA SCHOOL BOARDS ASSOCIATION Part IV 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		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			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
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		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	<u> </u>		
	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? <i>If</i>			
a	"Yes," complete Schedule L, Part IV	28a		х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?	200		
·	"Vea " complete Cabadyla I Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
50	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			
32		32		х
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 25
33	"	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		<del>  ^</del>
34		34	х	
25.0		35a	<del>  ^</del>	Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	งงล		
D		256		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36		36		
27	If "Yes," complete Schedule R, Part V, line 2	30		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		X
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	200	х	
Pai	Note: All Form 990 filers are required to complete Schedule 0  t V Statements Regarding Other IRS Filings and Tax Compliance	38	_ A	
ı aı				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
<b>.</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Effect the Hamber of Forms w 2d included in line 1a. Effect of inflot applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	X	

### 020) CALIFORNIA SCHOOL BOARDS ASSOCIATION Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			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								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		Х						
За	a Did the organization have unrelated business gross income of \$1,000 or more during the year?								
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X						
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		X					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
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		Х						
	any contributions that were not tax deductible as charitable contributions?	6a	Λ						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		Х						
_	were not tax deductible?	6b	Λ						
7	Organizations that may receive deductible contributions under section 170(c).	_							
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							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70							
اہ	to file Form 8282?	7c							
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e							
e •	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 <del>e</del> 7f							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<b>,,,</b>							
Ü	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders 11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
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							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans 13b								
С	Enter the amount of reserves on hand 13c								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			<b> </b>					
	excess parachute payment(s) during the year?	15		X					
	If "Yes," see instructions and file Form 4720, Schedule N.			17					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								

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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 28			
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		X
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		X
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 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, stockholders, or			
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		37	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
	The organization's CEO, Executive Director, or top management official	15a	Х	37
b	Other officers or key employees of the organization	15b		Х
	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			37
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3	)s only	) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d finar	ncial	
	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			
	STEPHEN W. POGEMILLER - 916-371-4691			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per		not c		ition <sub>more</sub>	than	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer b o		Highest compensated http://www.highest.compensated http://www.nc.nc.nc.nc.nc.nc.nc.nc.nc.nc.nc.nc.nc.	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) VERNON M BILLY CEO/EXECUTIVE DIRECTOR	39.60			Х			317,143.	0.	66,434.
(2) STEPHEN POGEMILLER	37.00						317,143.	•	00,434.
CHIEF FINANCIAL OFFICER	3.00			х			175,722.	0.	48,047.
(3) SCOTT HAMILTON	40.00						1/3//220		10,01,0
CHIEF TECHNOLOGY OFFICER					х		176,058.	0.	45,433.
(4) NAOMI EASON	31.00						,		<u> </u>
ASSISTANT EXECUTIVE DIRECTOR, MEMBER	9.00				Х		192,376.	0.	28,517.
(5) DENNIS MEYERS	40.00								
ASSISTANT EXECUTIVE DIRECTOR, GOVERN					Х		176,352.	0.	35,046.
(6) KEITH BRAY	40.00								
GENERAL COUNSEL AND CHIEF OF STAFF A					Х		179,760.	0.	18,146.
(7) ELAINE YAMA-GARCIA	40.00								
DEPUTY GENERAL COUNSEL/DIRECTOR, HR					Х		164,245.	0.	31,961.
(8) TROY FLINT	40.00					l			
PIO/SENIOR DIRECTOR, COMMUNICATIONS	4.0.00					Х	148,846.	0.	39,225.
(9) BOB TUERCK	40.00						155 000	•	20 220
AED POLICY & GOV. TECHNOLOGY TO 2/28	40 00				Х		157,209.	0.	30,338.
(10) ERIKA HOFFMAN	40.00					,,	127 022	0	20 662
LEGISLATIVE ADVOCATE	40 00					Х	137,022.	0.	29,663.
(11) BRYAN DEBLONK	40.00					x	140,760.	0.	21 022
EXTERNAL AFFAIRS DIRECTOR TO 10/2/20 (12) ANTON SPEKTOROV	40.00					^	140,700.	0.	21,932.
SENIOR ENTERPRISE ARCHITECT	40.00					x	143,522.	0.	10,382.
(13) CARLOS MACHADO	40.00						145,522.	•	10,302.
LEGISLATIVE ADVOCATE						x	135,087.	0.	13,740.
(14) XILONIN CRUZ-GONZALEZ	5.00						200,007		
PRES AS OF 12/7/19 AND IMMEDIATE PAS	1.40	х		x			29,682.	0.	0.
(15) SUZANNE KITCHENS	5.00								
PRESIDENT ELECT AS OF 12/7/19; PRES		Х		х			22,989.	0.	0.
(16) EMMA TURNER	5.00								
IMMEDIATE PAST PRES TO 12/4/20	1.40	Х		Х			13,495.	0.	0.
(17) SUSAN HEREDIA	5.00								
VP AS OF 12/7/19; PRES ELECT AS OF 1	1.40	Х		Х			13,495.	0.	0. Form <b>990</b> (2020)

Form **990** (2020)

Form 990 (2020) CALIFORI	NIA SCHO	ΟL	BO	DAI	RDS	S 2	ASS	SOCIATION	94-1510	492 Page 8
Part VII Section A. Officers, Directors, Tru	ıstees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations below	box	not c , unle	Pos heck ess pe nd a d	more rson lirecto	than is bot	h an tee)	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	line)	pivipu	ıstituti	Officer	ey em	ighest mploy	Former			organizations
(18) FRANK MAGARINO	1.00	_	_			T 00	_			
DIRECTOR REGION 1		х						0.	0.	0.
(19) SHERRY CRAWFORD	1.00									
DIRECTOR REGION 2		Х						0.	0.	0.
(20) TONY UBALDE	1.00									
DIRECTOR REGION 3		Х						0.	0.	0.
(21) PAIGE K. STAUSS	1.00									
DIRECTOR REGION 4 TO 12/4/20		Х						0.	0.	0.
(22) RENEE NASH	1.00									
DIRECTOR REGION 4 AS OF 12/4/20		Х						0.	0.	0.
(23) ALISA MACAVOY	1.00									
DIRECTOR REGION 5		Х						0.	0.	0.
(24) DARREL WOO	1.00									
DIRECTOR REGION 6		Х						0.	0.	0.
(25) YOLANDA PENA MENDREK	1.00									
DIRECTOR REGION 7		Х						0.	0.	0.
(26) MATT BALZARINI	1.00									
DIRECTOR REGION 8 TO 12/4/20		Х						0.	0.	0.
1b Subtotal							<b>&gt;</b>	2,323,763.	0.	418,864.
c Total from continuation sheets to Part	VII, Section A						ightharpoons	0.	0.	0.
d Total (add lines 1b and 1c)							<b></b>	2,323,763.	0.	418,864.
2 Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	ed al	bove	e) wł	no re	eceived more than \$100	0,000 of reportable	21

compensation from the organization

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on

Yes No Х 3 Х 4

X

	line 1a? If "Yes," complete Schedule J for such individual	_3
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization	
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services	

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
EBOARD SOLUTIONS, INC., 5120 SUGARLOAF		
PARKWAY, LAWRENCEVILLE, GA 30043	POLICY SERVICES	575,971.
SHOW IMAGING		
2438 CADES WAY, VISTA, CA 92081	AEC AUDIO VISUAL	236,400.
CALIFORNIA STRATEGIES & ADVOCACY LLC		
, 980 9TH ST, SUITE 2000, SACRAMENTO, CA	LOBBYING	150,000.
DANNIS WOLIVER KELLEY (SF), 2342 SHATTUCK		
AVENUE, SUITE 535, BERKELEY, CA 94704	LAW FIRM	109,636.
OUTSPOKEN AGENCY LLC		
42 MILLBROOK ROAD, BRIDGEPORT, WV 26330	SPEAKERS' AGENCY	101,000.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	
\$100,000 of compensation from the organization		

rendered to the organization? If "Yes," complete Schedule J for such person .

								SOCIATION	34-131	0474
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(C	<b>C)</b>			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cł	neck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	ruste	l trus		ee/	n pen				organizations
	below	dualt	ıtiona		mplo	st coi	<u>~</u>			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) STEPHEN SCHLUER	1.00									
DIRECTOR REGION 8 AS OF 12/4/20		х						0.	0.	0.
(28) TAMI GUNTHER	1.00									
DIRECTOR REGION 9		Х						0.	0.	0.
(29) SUSAN MARKARIAN	5.00									
DIRECTOR REGION 10 TO 12/4/20 AND VP	0.20	Х		Х				0.	0.	0.
(30) KATHY SPATE	1.00									
DIRECTOR REGION 10 AS OF 12/4/20		х						0.	0.	0.
(31) JACKIE MORAN	1.00									
DIRECTOR REGION 11 AS OF 1/26/20 TO		Х						0.	0.	0.
(32) SABRENA RODRIGUEZ	1.00									
DIRECTOR REGION 11 AS OF 1/30/21		Х						0.	0.	0.
(33) WILLIAM FARRIS	1.00									
DIRECTOR REGION 12		Х						0.	0.	0.
(34) MEG CUTULI	1.00									
DIRECTOR REGION 15		Х						0.	0.	0.
(35) KAREN GRAY	1.00									
DIRECTOR REGION 16		Х						0.	0.	0.
(36) DEBRA SCHADE	1.00									
DIRECTOR REGION 17		Х						0.	0.	0.
(37) WENDY JONATHAN	1.00									
DIRECTOR REGION 18		Х						0.	0.	0.
(38) ALBERT GONZALEZ	1.00									
DIRECTOR REGION 20		Х						0.	0.	0.
(39) SCOTT SCHMERELSON	1.00									
DIRECTOR REGION 21		Х						0.	0.	0.
(40) NANCY SMITH	1.00									
DIRECTOR REGION 22		Х						0.	0.	0.
(41) HELEN HALL	1.00									_
DIRECTOR REGION 23		Х						0.	0.	0.
(42) DONALD LAPLANTE	1.00									
DIRECTOR REGION 24 TO 12/4/20		Х						0.	0.	0.
(43) LEIGHTON ANDERSON	1.00									_
DIRECTOR REGION 24 AS OF 12/4/20		Х						0.	0.	0.
(44) BRUCE DENNIS	1.00									_
DIRECTOR-AT-LARGE, COUNTY		Х						0.	0.	0.
(45) JANET WOHLGEBUTH	1.00									
CA CO BOARDS OF ED PRES TO 12/4/20		Х						0.	0.	0.
(46) RICK SHEA	1.00									
CA CO BOARDS OF ED PRES AS OF 12/4/2		Х						0.	0.	0.
Total to Part VII, Section A, line 1c										

Form 990 CALIFORN	LA SCHOO	<u>고</u>	В	JAI	RDS	5 <i>E</i>	<u>188</u>	SOCIATION	94-151	0492
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)				<b>C)</b>			(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				empl		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	truste	al frus		yee	mpen				organizations
	below	Individual trustee or director	Institutional trustee	<u></u>	Key employee	Highest compensated employee	ъ			0.ga <b>_</b>
	line)	Indiv	Instit	Officer	Key e	High	Former			
(47) CRYSTAL MARTINEZ-ALIRE	1.00									
DIRECTOR-AT-LARGE, AMERICAN INDIAN		Х						0.	0.	0.
(48) GINO KWOK	1.00									
DIRECTOR-AT-LARGE, ASIAN PACIFIC ISL		Х						0.	0.	0.
(49) AMY KOO	1.00									_
DIRECTOR-AT-LARGE, ASIAN PACIFIC ISL		Х						0.	0.	0.
(50) BETTYE LUSK	1.00	l								
DIRECTOR-AT-LARGE, AFRICAN AMERICAN	1 00	Х						0.	0.	0.
(51) JOAQUIN RIVERA	1.00	x						0.	0.	_
DIRECTOR-AT-LARGE, HISPANIC	1.00	^						0.	0.	0.
(52) CHRIS UNGAR NSBA DIRECTOR TO 4/7/20	1.00	х						0.	0.	0.
NSBA DIRECTOR TO 4/1/20									0.	•
		_		$\vdash$	_	_				
	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>				
Total to Part VII, Section A, line 1c										
Total to Lait VII, Occilon A, III C IC								1	I .	

Page 9

Form 990 (2020) CALIFORI
Part VIII Statement of Revenue

		Check if Schedule O	conta	ins a respon	se or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	<b>(D)</b> Revenue excluded
						Total revenue	Related or exempt function revenue	Unrelated business revenue	former kerrerenden
							, and the state of		sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns		1a					
	b	Membership dues		1b					
	С	Fundraising events		1c					
	d	Related organizations		1d	1,000,000.				
	е	Government grants (cont	ributic	ons) <b>1e</b>					
	f	All other contributions, gifts,	grants	s, and					
		similar amounts not included	labove	e <b>1f</b>	280,013.				
g	g	Noncash contributions included in	lines 1	a-1f <b>1g</b> \$					
<u>8</u> 0	h	Total. Add lines 1a-1f			<b></b>	1,280,013.			
					Business Code				
Se	2 a	MEMBERSHIP DUES			900099	7,951,909.	7,951,909.		
e Zi	b	POLICY SERVICES			900099	4,932,294.	4,906,736.	25,558.	
Program Service Revenue	С	CONTINUING EDUCATIO	N		900099	2,082,274.	2,082,274.		
lev Sev	d	EDUCATION LEGAL ALL	IANC	E	900099	1,509,660.	1,509,660.		
P. P	е	CCBE PROGRAMS			900099	168,754.	168,754.		
Δ.	f	All other program service	reven	nue	900099	122,971.	122,971.		
	g	Total. Add lines 2a-2f				16,767,862.			
	3	Investment income (include							
		other similar amounts)				99,697.			99,697.
	4	Income from investment of	of tax-	exempt bon	d proceeds				
	5	Royalties	<u></u>						
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	b	Less: rental expenses	6b						
	С	Rental income or (loss)	6с						
		Net rental income or (loss	s) <u></u>		<b></b>				
		Gross amount from sales of		(i) Securitie	s (ii) Other				
		assets other than inventory	7a	654,82	1.				
	b	Less: cost or other basis							
an		and sales expenses	7b	654,82	1.				
ther Revenue	С	Gain or (loss)	7с		0.				
Be	d	Net gain or (loss)		<u>.</u>					
her		Gross income from fundraisi							
ŏ		including \$		of					
		contributions reported on	line 1	1c). See					
		Part IV, line 18			Ва				
	b	Less: direct expenses			Bb				
	С	Net income or (loss) from	fundr	aising events	s ,				
	9 a	Gross income from gamin	ig act	ivities. See					
		Part IV, line 19			9a				
	b	Less: direct expenses			9b				
	С	Net income or (loss) from	gamir	ng activities					
	10 a	Gross sales of inventory,	less re	eturns					
		and allowances		1	0a				
	b	Less: cost of goods sold			0b				
		Net income or (loss) from		_	<b>&gt;</b>				
S					Business Code				
Miscellaneous Revenue	11 a								
an Ju	b								
ie el	С								
Ajs.	d	All other revenue							
		Total. Add lines 11a-11d							
	12	Total revenue. See instruction	ons .		<b>&gt;</b>	18,147,572.	16,742,304.	25,558.	99,697.

### 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 respon	se or note to any line in	this Part IX	···	
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
'	and domestic governments. See Part IV, line 21				
•					
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,	0 000 056	1 070 640	EE1 013	
	trustees, and key employees	2,030,856.	1,279,643.	751,213.	
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	7,340,910.	4,605,891.	2,735,019.	
8	Pension plan accruals and contributions (include				·
	section 401(k) and 403(b) employer contributions)	1,070,579.	689,320.	381,259.	
9	Other employee benefits	1,073,357.	692,764.	380,593.	
10	Payroll taxes	626,970.	400,966.	226,004.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	369,705.	180,275.	189,430.	
	Accounting	50,100.	-	50,100.	
d	Lobbying	150,000.	150,000.	•	
e	Professional fundraising services. See Part IV, line 17	,	,		
f	Investment management fees	11,637.		11,637.	
g g	//*//				
9	column (A) amount, list line 11g expenses on Sch 0.)	697,258.	624,732.	72,526.	
12	Advertising and promotion	203,358.	193,559.	9,799.	
		919,880.	494,906.	424,974.	
13	Office expenses	290,081.	179,553.	110,528.	
14	Information technology	250,001.	177,333.	110,520.	
15	Royalties	334,843.	6,996.	327,847.	
16	Occupancy	14,115.	11,315.	2,800.	
17	Travel	14,113.	11,313.	2,000.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	334,749.	333,429.	1,320.	
19	Conferences, conventions, and meetings	334,/49.	333,449.	1,340.	
20	Interest				
21	Payments to affiliates	401 FOC		401 FOC	
22	Depreciation, depletion, and amortization	421,596.	64 400	421,596.	
23	Insurance	281,272.	64,402.	216,870.	
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.)	480		110	
а	DUES AND SUBSCRIPTIONS	170,779.	57,318.	113,461.	
b	STAFF DEVELOPMENT	30,587.	14,292.	16,295.	
С	CSBA PAC EXPENSES	4,066.	0.	4,066.	
d	OVERHEAD APPLIED	-141,320.	4,373,085.	-4,514,405.	
е	All other expenses	136,312.	19,359.	116,953.	
25	Total functional expenses. Add lines 1 through 24e	16,421,690.	14,371,805.	2,049,885.	0.
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 if following SOP 98-2 (ASC 958-720)				
03201	12-23-20				Form <b>990</b> (2020)

# Form 990 (2020) Part X Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	1,004,044.	1	829,347.		
	2	Savings and temporary cash investments	11,117,382.	2	11,912,249.		
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			191,893.	4	146,984.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial o	contributor, or 35%			
		controlled entity or family member of any of these persons			100.	5	
	6	Loans and other receivables from other disqualit	ied pe				
		under section 4958(f)(1)), and persons described	l in sec	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			50,821.	8	60,969.
Ř	9				736,045.	9	670,904.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	8,594,008.			
	b	Less: accumulated depreciation	10b	3,114,999.	5,340,470.	10c	5,479,009.
	11	Investments - publicly traded securities			1,232,122.	11	1,165,022.
	12	Investments - other securities. See Part IV, line 1	1			12	316,350.
	13	Investments - program-related. See Part IV, line	l1			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	33)	19,672,877.	16	20,580,834.
	17	Accounts payable and accrued expenses		364,191.	17	730,428.	
	18	Grants payable				18	
	19	Deferred revenue			1,812,909.	19	1,515,524.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
<u> </u>		controlled entity or family member of any of thes				22	
_	23	Secured mortgages and notes payable to unrela		F		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pages					
		parties, and other liabilities not included on lines	17-24)	). Complete Part X	2 500 600		1 610 200
		of Schedule D		·····	2,500,609.		1,619,308.
	26	Total liabilities. Add lines 17 through 25			4,677,709.	26	3,865,260.
Se		Organizations that follow FASB ASC 958, che	ck her	e ▶ 🚣			
ğ		and complete lines 27, 28, 32, and 33.			14,995,168.	07	16,715,574.
3ala	27				14,993,100.	27	10,713,374.
βE	28	Net assets with donor restrictions				28	
Ξ		Organizations that do not follow FASB ASC 9	58, CN	eck nere			
Net Assets or Fund Balances	20	and complete lines 29 through 33.				20	
ets	29	Capital stock or trust principal, or current funds				29	
Ass	30	Paid-in or capital surplus, or land, building, or eq				30	
et/	31	Retained earnings, endowment, accumulated in		F	14,995,168.	31	16,715,574.
Z	32	Total net assets or fund balances			19,672,877.	32	20,580,834.
	33	Total liabilities and net assets/fund balances			10,012,011.	<b>ა</b> ა	20,300,034.

Form **990** (2020)

Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Ш
1	Total revenue (must equal Part VIII, column (A), line 12)	1	18,1		
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,4		
3	Revenue less expenses. Subtract line 2 from line 1	3		25,8	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,9		
5	Net unrealized gains (losses) on investments	5		-5,4	.76 <b>.</b>
6	Donated services and use of facilities	6			
7	Investment expenses	7			_
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	16,7	15,5	74.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.	_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		22		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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?		2t	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		20	: X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	-	3a	1	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
				000	/ :

Form **990** (2020)

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

CALIFORNIA SCHOOL BOARDS ASSOCIATION

OMB No. 1545-0047

**2020** 

Name of the organization

Employer identification number

94-1510492

Organization type (check one):							
Filers of:		Section:					
Form 990	or 990-EZ	$\overline{X}$ 501(c)( $\overline{4}$ ) (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					
		s covered by the <b>General Rule</b> or a <b>Special Rule</b> . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special I	Rules						
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, 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; 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 contributed year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If 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 <b>General Rule</b> applies to this organization because it received nonexclus religious, charitable, etc., contributions totaling \$5,000 or more during the year							
but it mu	st answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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					

 $\ \, \text{LHA} \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

# CALIFORNIA SCHOOL BOARDS ASSOCIATION

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	N/A		Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	N/A	\$12,532.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	N/A  N/A	\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	N/A	s13,322.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	N/A	\$14,923.	Person X Payroll

# CALIFORNIA SCHOOL BOARDS ASSOCIATION

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	N/A	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	N/A	\$9,761.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	N/A	\$\$8,001.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11_	N/A	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	N/A	\$6,815.	Person X Payroll

# CALIFORNIA SCHOOL BOARDS ASSOCIATION

Part I	art I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution		
13	N/A	\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
14	N/A	\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
140.	Name, audi ess, aliu ZIF + 4	*	Person Payroll Omnocash Complete Part II for noncash contributions.)		

# CALIFORNIA SCHOOL BOARDS ASSOCIATION

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

### CALIFORNIA SCHOOL BOARDS ASSOCIATION

Part III	from any one contributor. Complete columns (a)	through (e) and the following li	ne entry. For o	01(c)(7), (8), or (10) that total more than \$1,000 for the year	
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,0	00 or less for th	ne 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 gift		
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Parti					
		(e) Transfer	ifer of gift		
	Transferee's name, address, a	nd ZIP + 4	Re	elationship 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	fer of gift		
	Transferee's name, address, a	nd ZIP + 4	Re	elationship 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 gift		
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee	
l					

#### **SCHEDULE C**

(Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

#### If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

•	Section 501(c)(4), (5), or (6) organiza	itions: Complete Part III.			
Nan	ne of organization			Em	oloyer identification number
		RNIA SCHOOL BOARI			94-1510492
Pa	art I-A Complete if the or	ganization is exempt un	der section 501(c)	or is a section 527	organization.
2	Provide a description of the organi Political campaign activity expendi Volunteer hours for political campa	tures ign activities		<b>&gt;</b>	\$
	-	ganization is exempt un		• •	
1	Enter the amount of any excise tax	incurred by the organization ur	nder section 4955	<b>&gt;</b>	\$
	Enter the amount of any excise tax		-		
	If the organization incurred a section				
4a	Was a correction made?				Yes No
	o If "Yes," describe in Part IV.	<del> </del>	1 1' 504/ \		1( )(0)
	art I-C Complete if the or				
	Enter the amount directly expende				\$
2	Enter the amount of the filing organ		· ·		
_	exempt function activities				\$
3	Total exempt function expenditure			•	Φ.
	line 17b	4400 001 ( 11 )		<b>~</b>	\$
	Did the filing organization file Form				
5	Enter the names, addresses and e made payments. For each organiza contributions received that were properties of the contributions and the contributions received that were properties of the contributions and the contributions received that were properties of the contributions and the contributions are contributions.	ation listed, enter the amount pa	aid from the filing organi	zation's funds. Also enter	the amount of political
	political action committee (PAC). If	additional space is needed, pro	ovide information in Part	IV.	
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

Schedule C (Form 990 or 990-EZ) 2020					510492 Page 2
Part II-A Complete if the org	anization is ex	empt under section	on 501(c)(3) and fil	ed Form 5768 (e	lection under
section 501(h)).					
	-	ffiliated group (and list in	n Part IV each affiliated	group member's nam	ne, address, EIN,
expenses, and shar	•				
B Check ► ☐ if the filing organiza	tion checked box A	and "limited control" pro	ovisions apply.		
	ts on Lobbying Exp litures" means amo	enditures ounts paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinior	(grassroots lobbying)			
<b>b</b> Total lobbying expenditures to influ	uence a legislative b	ody (direct lobbying)			
c Total lobbying expenditures (add li	nes 1a and 1b)				
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	s (add lines 1c and	1d)			
f Lobbying nontaxable amount. Ente	er the amount from t	he following table in bot	th columns.		
If the amount on line 1e, column (a) o	r (b) is: The Id	bbying nontaxable am	ount is:		
Not over \$500,000	20% c	of the amount on line 1e			
Over \$500,000 but not over \$1,000	0,000 \$100,0	000 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,0	000 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,0	000 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000	0,000.			
g Grassroots nontaxable amount (en	ter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	o or less, enter -0-				
i Subtract line 1f from line 1c. If zero					
j If there is an amount other than ze	ro on either line 1h o	or line 1i, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this	year?			<u>_</u>	Yes No
		veraging Period Under			
(Some organizations the		• •	•	of the five columns b	elow.
	<u>-</u>	rate instructions for li			
	Lobbying Exp	enditures During 4-Ye	ar Averaging Period		1
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		)	(b)	
activity.	Yes	No	Amo	ount
e year, did the filing organization attempt to influence foreign, national, state, or				
slation, including any attempt to influence public opinion on a legislative matter				
ndum, through the use of:				
rs?				
f or management (include compensation in expenses reported on lines 1c through 1i)?				
vertisements?				
Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(	5) or se	ection	
	311 30 1(C)(	<i>5)</i> , 01 30	CLIOII	
			Yes	N
ostantially all (90% or more) dues received nondeductible by members?		1	X	
		1		
	Jui			
		22		
		3		
·				
	oolitical			
,		4		
		5		
were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excorganization agree to carryover to the reasonable estimate of nondeductible lobbying and pure next year?	cess political		4	4
		5		-
	for management (include compensation in expenses reported on lines 1c through 1i)?  Invertisements?  Ito members, legislators, or the public?  Ito members, legislators for lobbying purposes?  Intact with legislators, their staffs, government officials, or a legislative body?  Intact with legislators, their staffs, government officials, or a legislative body?  Intact with legislators, their staffs, government officials, or a legislative body?  Intact with legislators, seminars, conventions, speeches, lectures, or any similar means?  Intervities?  Intervities in line 1 cause the organization to be not described in section 501(c)(3)?  Intervities in line 1 cause the organization to be not described in section 501(c)(3)?  Intervities in line 1 cause the organization duer section 4912  Intervities in line 1 cause the organization managers under section 4912  Intervities in line 1 cause the organization is exempt under section 501(c)(4), section for the amount of any tax incurred by organization managers under section 4912  Intervities in line 1 cause the organization is exempt under section 501(c)(4), section for the organization is exempt under section 501(c)(4), section for the organization agree to carry over lobbying expenditures of \$2,000 or less?  Intervities in line 1 cause the organization is exempt under section 501(c)(4), section for the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section for the organization agree to carry over lobbying and political expenditures (do not include amounts of politics for which the section 527(f) tax was paid).  Intervities in line 1 cause the organization is exempt under section 162(e) dues in the intervities of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pure next year?	for management (include compensation in expenses reported on lines 1c through 1i)?  for management (include compensation in expenses reported on lines 1c through 1i)?  livertisements?  lother organizations for lobbying purposes?  ntact with legislators, their staffs, government officials, or a legislative body?  emonstrations, seminars, conventions, speeches, lectures, or any similar means?  livities?  d lines 1c through 1i  ctivities in line 1 cause the organization to be not described in section 501(c)(3)?  enter the amount of any tax incurred under section 4912  g organization incurred a section 4912 tax, did if file Form 4720 for this year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6).  Destantially all (90% or more) dues received nondeductible by members?  reganization make only in-house lobbying expenditures of \$2,000 or less?  reganization make only in-house lobbying and political campaign activity expenditures from the prior year  Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6)).  Destantially all (90% or more) dues received nondeductible by members?  reganization make only in-house lobbying expenditures of \$2,000 or less?  reganization agree to carry over lobbying and political campaign activity expenditures from the prior year  Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes."  sessments and similar amounts from members  (62(e) nondeductible lobbying and political expenditures (do not include amounts of political so for which the section 527(f) tax was paid).  ear  r from last year  e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  were sent and the amount on line 2 exceeds the amount on line 3, what portion of the excess organization agree to carryover to the reasonable estimate of nondeductible lobbying and political ure next year?  amount of lobbying a	for management (include compensation in expenses reported on lines 1c through 1i)?  for managements?  to members, legislators, or the public?  ons, or published or broadcast statements?  or other organizations for lobbying purposes?  on the organizations for lobbying purposes?  d lines 1c through 1i  ctivities in line 1 cause the organization to be not described in section 501(c)(3)?  enter the amount of any tax incurred under section 4912  enter the amount of any tax incurred by organization managers under section 4912  g organization incurred a section 4912 tax, did it file Form 4720 for this year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6).  estantially all (90% or more) dues received nondeductible by members?  granization make only in-house lobbying expenditures of \$2,000 or less?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  sessments and similar amounts from members  662(e) nondeductible lobbying and political expenditures (do not include amounts of political s for which the section 527(f) tax was paid).  ear  r from last year  e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  3 were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess organization agree to carryover to the reasonable estimate of nondeductible lobbying and political ure next year?  4 amount of lobbying and political expenditures (See instructions)  5 Supplemental Information	for management (include compensation in expenses reported on lines 1c through 1i)?  for managements?  to members, legislators, or the public?  ons, or published or broadcast statements?  on the organizations for lobbying purposes?  mact with legislators, their staffs, government officials, or a legislative body?  emonstrations, seminars, conventions, speeches, lectures, or any similar means?  d lines 1c through 1i  cutivities?  d line 1 cause the organization to be not described in section 501(c)(3)?  enter the amount of any tax incurred under section 4912  enter the amount of any tax incurred by organization managers under section 4912  go grapnization incurred a section 4912 tax, did it file Form 4720 for this year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Yes  sestantially all (90% or more) dues received nondeductible by members?  grapnization make only in-house lobbying expenditures of \$2,000 or less?  2 granization agree to carry over lobbying and political campaign activity expenditures from the prior year?  3 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, lines are any similar amounts from members  62(e) nondeductible lobbying and political expenditures (do not include amounts of political secure in the section 527(f) tax was paid).  ear  r from last year  2a  r from last year  2b  2c  the amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  3 were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (See instructions)  5 Supplemental Information

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

CALIFORNIA SCHOOL BOARDS ASSOCIATION

Employer identification number 94-1510492

Pa	rt I Organizations Maintaining Donor Advis	ed Funds or Other Similar Funds	or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, li	ine 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	•	ed funds
	are the organization's property, subject to the organization'	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the o		
1	Purpose(s) of conservation easements held by the organiza	ation (check all that apply).	
	Preservation of land for public use (for example, recre	eation or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic s	tructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	d after 7/25/06, and not on a historic structu	ıre
	listed in the National Register		
3	Number of conservation easements modified, transferred, r		
	year▶		
4	Number of states where property subject to conservation e	asement is located >	
5	Does the organization have a written policy regarding the policy	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	g, handling of violations, and enforcing cons	servation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, har	ndling of violations, and enforcing conserva	tion easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements 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 conserva	tion easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the foo	tnote to the organization's financial stateme	ents that describes the
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections		ther Similar Assets.
	Complete if the organization answered "Yes" on For	m 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 9	958, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for pu	ublic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its final	ancial statements that describes these item	is.
b	If the organization elected, as permitted under FASB ASC 9	958, to report in its revenue statement and I	palance sheet works of
	art, historical treasures, or other similar assets held for publ	lic exhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tr	reasures, or other similar assets for financia	l gain, provide
	the following amounts required to be reported under FASB	ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
h	Assets included in Form 990 Part Y		•

Pai	t III Organizations Maintaining C	collections of A	rt, His	torical Tı	reasures,	or Other	Similar A	ssets(continue	ed)
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	k any of the	following that	at make sig	nificant use o	of its	
	collection items (check all that apply):								
а	Public exhibition	d		Loan or exc	change progra	am			
b	Scholarly research	е							
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how tl	hey further t	the organizati	ion's exemp	ot purpose in	Part XIII.	
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's c	ollection?			Yes	No_
Pai	rt IV Escrow and Custodial Arran							t IV, line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	ssets not in	cluded		
	on Form 990, Part X?							Yes	O No
b	If "Yes," explain the arrangement in Part XIII								
								Amount	
С	Beginning balance						1c		
	Additions during the year						1d		
	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on F						?	Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.								
Pai	t V Endowment Funds. Complete i	f the organization ar	swered	"Yes" on F	orm 990, Par	t IV, line 10			
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back (d	<b>)</b> Three years b	ack (e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1	g, column (	a)) held as:				
а	Board designated or quasi-endowment		%						
b	Permanent endowment	%	<u></u>						
С	Term endowment	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
За	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	and administe	ered for the	organization		
	by:							Ye	es No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations								
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	Schedule R?	?			3b	
4	Describe in Part XIII the intended uses of the	organization's endo	owment	funds.					
Pai	rt VI Land, Buildings, and Equipm	nent.							
	Complete if the organization answere	d "Yes" on Form 990	0, Part I	V, line 11a.	See Form 990	D, Part X, Iir	ne 10.		
	Description of property	(a) Cost or o			t or other (other)		umulated eciation	<b>(d)</b> Book v	alue
1a	Land	<u> </u>			2,336.	,		712	,336.
	Buildings				74,898.	1.15	8,581.	3,716	
	Leasehold improvements			,	5,973.	,	5,973.		0.
	Equipment			1,22	27,277.	83	39,235.	388.	,042.
	Other				73,524.		11,210.		,314.
	I. Add lines 1a through 1e. (Column (d) must e		X, colur			<u> </u>	<b></b>	5,479	

Scriedule D	(1 01111 990) 2020	O1111.
Dowt VIII	Invoctmente	Other Se

Complete if the organization answered "Yes"			-
(a) Description of security or category (including name of security)	(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, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(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, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	(h) Dook volue
· · · · · · · · · · · · · · · · · · ·	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	45)		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		
	on Form 000 Port IV line	110 or 11f Coo Form 000 Port V line 05	
Complete if the organization answered "Yes"  (a) Description of liability	on Form 990, Part IV, line	The or Th. See Form 990, Part X, line 25.	(b) Book value
			(b) DOOR Value
(1) Federal income taxes (2) COMPENSATED ABSENCES			751,670
			867,638
(3) INTERCOMPANY PAYABLES			001,038
(4)			
(5)			
(6)			
(7)		<u> </u>	
(8)		<u> </u>	
(9)	05)		1 610 200
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)	<b>&gt;</b>	1,619,308

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Pa	rt XI Reconciliation of Revenue per Audited Financial S	Statements With Revenu	ie per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV	<sup>7</sup> , line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d				
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	
Pa	rt XII Reconciliation of Expenses per Audited Financial	Statements With Expen	ses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV	, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b				
С	0.1			
d				
е		' <del>-</del>	2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а		4a		
b		T 1		
С	Add lines <b>4a</b> and <b>4b</b>	•	4c	
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, lin			
	rt XIII Supplemental Information.	,	•	
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	nd 4; Part IV, lines 1b and 2b; P	art V, line 4; Part X, line 2; Part	XI,
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid			
		•		
PA]	RT X, LINE 2:			
	·			
TH	E ASSOCIATION HAS APPLIED THE ACCOUNT	ING PRINCIPLES R	ELATED TO	
AC	COUNTING FOR UNCERTAINTY IN INCOME TA	XES AND HAS DETE	RMINED THAT THE	RE
IS	NO MATERIAL IMPACT ON THE FINANCIAL	STATEMENTS.		

032054 12-01-20 Schedule D (Form 990) 2020

#### **SCHEDULE J** (Form 990)

**Compensation Information** 

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

CALIFORNIA SCHOOL BOARDS ASSOCIATION

Employer identification number 94-1510492

	·		Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	<b>1</b> b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
_				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9	1	l

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

Schedule J (Form 990) 2020

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-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
(1) VERNON M BILLY	(i)	317,143.	0.	0.	30,162.	36,272.	383,577.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) STEPHEN POGEMILLER	(i)	175,722.	0.	0.	9,254.	38,793.	223,769.	0.	
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) SCOTT HAMILTON	(i)	176,058.	0.	0.	9,250.	36,183.	221,491.	0.	
CHIEF TECHNOLOGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) NAOMI EASON	(i)	192,376.	0.	0.	9,187.	19,330.	220,893.	0.	
ASSISTANT EXECUTIVE DIRECTOR, MEMBER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) DENNIS MEYERS	(i)	176,352.	0.	0.	16,674.	18,372.	211,398.	0.	
ASSISTANT EXECUTIVE DIRECTOR, GOVERN	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) KEITH BRAY	(i)	179,760.	0.	0.	17,197.	949.	197,906.	0.	
GENERAL COUNSEL AND CHIEF OF STAFF A	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) ELAINE YAMA-GARCIA	(i)	164,245.	0.	0.	15,411.	16,550.	196,206.	0.	
DEPUTY GENERAL COUNSEL/DIRECTOR, HR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) TROY FLINT	(i)	148,846.	0.	0.	13,814.	25,411.	188,071.	0.	
PIO/SENIOR DIRECTOR, COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) BOB TUERCK	(i)	157,209.	0.	0.	9,343.	20,995.	187,547.	0.	
AED POLICY & GOV. TECHNOLOGY TO 2/28	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) ERIKA HOFFMAN	(i)	137,022.	0.	0.	12,881.	16,782.	166,685.	0.	
LEGISLATIVE ADVOCATE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) BRYAN DEBLONK	(i)	140,760.	0.	0.	7,778.	14,154.	162,692.	0.	
EXTERNAL AFFAIRS DIRECTOR TO 10/2/20	(ii)	0.	0.	0.	0.	0.	0.	0.	
(12) ANTON SPEKTOROV	(i)	143,522.	0.	0.	9,378.	1,004.	153,904.	0.	
SENIOR ENTERPRISE ARCHITECT	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### SCHEDULE O

Internal Revenue Service

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

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

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

► Attach to Form 990 or 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

2020 Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CALIFORNIA SCHOOL BOARDS ASSOCIATION

Employer identification number 94-1510492

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: GOVERNANCE. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: DISTRICT AND COUNTY LEVELS. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: COPIES OF AGENDAS AND RELATED BACKGROUND MATERIAL. THIS SERVICE SAVES THE DISTRICT STAFF TIME AND REDUCES COSTS. POLICY DEVELOPMENT WORKSHOPS ARE DESIGNED TO BRING TOGETHER THE EXPERTISE AND EXPERIENCE OF A CSBA CONSULTANT WITH DISTRICT ADMINISTRATORS AND/OR BOARD MEMBERS TO PRODUCE A DISTRICT POLICY MANUAL THAT COMPLIES WITH STATE AND FEDERAL LAW, AND MEETS LOCAL NEEDS. POLICY MANUAL REVIEWS PROVIDE SCHOOL DISTRICTS WITH A REPORT COMPARING THEIR ADOPTED POLICIES WITH THE CURRENT CSBA SAMPLE POLICIES. THE REPORT SUMMARIZES REVISIONS TO THE CSBA SAMPLE POLICIES THAT MAY HAVE NOT BEEN UPDATED IN THE DISTRICT POLICY MANUAL. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: BUSINESS PARTNERS, AND EXHIBITORS. GOVERNANCE CONSULTING SERVICES PROVIDES DIRECT SUPPORT TO GOVERNANCE TEAMS BY OFFERING CUSTOMIZED WORKSHOPS ON EFFECTIVE GOVERNANCE, BOARD SELF-EVALUATION, AND SUPERINTENDENT EVALUATION. SINCE THE PANDEMIC HAS LIMITED FACE-TO-FACE INTERACTIONS, TRAINING SERVICES HAVE EVOLVED TO INCLUDE VIRTUAL

Name of the organization CALIFORNIA SCHOOL BOARDS ASSOCIATION

Employer identification number 94-1510492

OPTIONS.

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

THE EDUCATION LEGAL ALLIANCE (ELA) TAKES ON ISSUES OF STATEWIDE IMPACT
ON BEHALF OF ITS MEMBERS, SUPPORTS MEMBERS IN LEGAL CHALLENGES, AND

TRACKS CASE LAW PERTINENT TO EDUCATION IN CALIFORNIA. IT FILES AMICUS
BRIEFS AND LAWSUITS THAT SUPPORT SCHOOL DISTRICTS ON MATTERS OF

STATEWIDE IMPORTANCE. DISTRICTS AND COUNTY OFFICES OF EDUCATION, ON A

VOLUNTARY BASIS, CONTRIBUTE ANNUALLY TO A FUND THAT IS RESTRICTED FOR

LEGAL ACTIVITY. AN ADVISORY COMMITTEE OF NOTED SCHOOL LAW ATTORNEYS

REVIEWS CASES AND LEGAL ISSUES AND ADVISES A STEERING COMMITTEE ON THE

POTENTIAL STATEWIDE IMPACT OF THE CASE AS WELL AS THE LIKELIHOOD OF

SUCCESS IN THE COURTS. THE STEERING COMMITTEE, COMPRISED OF PROMINENT

BOARD MEMBERS, SUPERINTENDENTS, AND EDUCATION AND POLITICAL EXPERTS,

UNLESS THE DECISION HAS SIGNIFICANT IMPLICATIONS AND IS SENT ON TO THE

BOARD WITH A RECOMMENDATION, MAKES THE FINAL DECISION ABOUT FUNDING

VARIOUS LEGAL PROJECTS AND CASES.

THE COMMUNICATIONS DEPARTMENT SUPPORTS THE REALIZATION OF CSBA'S VISION

AND MISSION BY INCREASING UNDERSTANDING OF AND SUPPORT FOR THE SCHOOL

BOARD ROLE IN STRENGTHENING PUBLIC SCHOOLS AND IMPROVING STUDENT

OUTCOMES. THE DEPARTMENT ENGAGES MEMBERS, THE PUBLIC, POLICYMAKERS, KEY

INFLUENCERS, AND THE MEDIA THROUGH A RANGE OF COMMUNICATION CHANNELS.

THESE CHANNELS INCLUDE BUT ARE NOT LIMITED TO: DAILY AND WEEKLY DIGESTS

OF EDUCATION NEWS STORIES; WEEKLY E-NEWSLETTERS; REGULAR BLOG POSTS;

THE MONTHLY CALIFORNIA SCHOOL NEWSLETTER; THE QUARTERLY CALIFORNIA

SCHOOL MAGAZINE; REGULAR UPDATES TO MULTIPLE WEBSITES INCLUDING

CSBA.ORG AND AEC.CSBA.ORG; NEWS ADVISORIES AND PRESS RELEASES,

CALIFORNIA SCHOOL BOARDS ASSOCIATION

Employer identification number 94-1510492

MARKETING COLLATERAL, SPECIAL PUBLICATIONS, THE CSBA YEAR-IN-REVIEW,

AND REGULAR COMMUNICATION THROUGH SOCIAL MEDIA PLATFORMS SUCH AS

FACEBOOK, TWITTER, AND YOUTUBE. THE DEPARTMENT ALSO ARRANGES PRESS

EVENTS, FIELDS MEDIA INQUIRIES AND OTHER PUBLIC QUESTIONS, AND PROVIDES

EXECUTIVE SUPPORT IN THE FORM OF SPEECHWRITING AND MESSAGING. THROUGH

ITS MEMBER COMMUNICATIONS, CSBA REACHES MORE THAN 5,000 SCHOOL BOARD

TRUSTEES AND THEIR SUPERINTENDENTS IN MORE THAN 1,000 SCHOOL DISTRICTS,

COUNTY OFFICES OF EDUCATION, AND REGIONAL OCCUPATIONAL

CENTERS/PROGRAMS. EXTERNALLY, CSBA'S STATEMENTS AND POSITIONS REGULARLY

APPEAR IN MAINSTREAM NEWS PUBLICATIONS ACROSS THE STATE OF CALIFORNIA,

AND FREQUENTLY IN THE NATIONAL MEDIA.

RESEARCH AND EDUCATION POLICY DEVELOPMENT: PROVIDES ANALYSIS OF MAJOR

EDUCATION ISSUES AND PROVIDES INFORMATION ON THOSE ISSUES TO CSBA'S

LEADERSHIP AND MEMBERSHIP. THE DEPARTMENT ALSO RESPONDS TO REQUESTS

FROM BOARD MEMBERS AND OTHER EDUCATIONAL ORGANIZATIONS FOR STATISTICS

AND OTHER INFORMATION ABOUT EDUCATION IN CALIFORNIA.

THE BUSINESS AFFILIATES PROGRAM: CSBA'S CONSOLIDATED MARKETING EFFORTS

STRENGTHEN OUR RELATIONSHIPS WITH THE PRIVATE SECTOR AND GENERATE

ADDITIONAL REVENUES FOR THE ASSOCIATION. THE "PACKAGE" CONCEPT OF

BENEFITS, DISCOUNTS, AND RECOGNITION OFFERS SUBSTANTIAL APPEAL FOR

POTENTIAL CSBA SPONSORS, DONORS, EXHIBITORS, AND ADVERTISERS.

CCBE PROGRAMS: THE CALIFORNIA COUNTY BOARDS OF EDUCATION (CCBE) IS A

SUBSET OF CSBA AND HAS HISTORICALLY REPRESENTED COUNTY MEMBERS' BOARDS.

THROUGH ADVOCACY, TRAINING OPPORTUNITIES, MENTORING, MARKETING, AND

COMMUNICATIONS, CCBE SERVES AND REPRESENTS COUNTY BOARDS OF EDUCATION,

Name of the organization CALIFORNIA SCHOOL BOARDS ASSOCIATION

Employer identification number 94-1510492

STRENGTHENING AND PROMOTING LOCAL GOVERNANCE, AND ENABLING COUNTY

BOARDS TO HELP EVERY STUDENT SUCCEED.

CCSA PROGRAMS: THE CALIFORNIA COUNCIL OF SCHOOL ATTORNEYS (CCSA) IS

ADMINISTERED BY CSBA AND COMPRISES ATTORNEYS REPRESENTING SCHOOL

DISTRICTS IN CALIFORNIA. ITS PURPOSE IS TO IDENTIFY CURRENT LEGAL

PROBLEMS FACING SCHOOL BOARDS AND TO DISSEMINATE LEGAL INFORMATION AND

ANALYSES THROUGH TRAININGS AND WORKSHOPS FOR SCHOOL ATTORNEYS AND BOARD

MEMBERS.

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

EXPENSES \$ 3,319,900. INCLUDING GRANTS OF \$ 0. REVENUE \$ 9,753,294.

FORM 990, PART VI, SECTION A, LINE 1:

ACCORDING TO THE BYLAWS AND STANDING RULES OF THE ASSOCIATION, THE BOARD OF DIRECTORS AND THE EXECUTIVE COMMITTEE HAVE BEEN DELEGATED AUTHORITY TO TAKE ACTION ON BEHALF OF THE ASSOCIATION. THE EXECUTIVE COMMITTEE IS COMPRISED OF FOUR OFFICERS: PRESIDENT, PRESIDENT-ELECT, VICE PRESIDENT AND IMMEDIATE PAST PRESIDENT. THE BOARD OF DIRECTORS IS COMPRISED OF 28 DIRECTORS PLUS THE EXECUTIVE COMMITTEE AND IT TOO MAY ACT BETWEEN MEETINGS OF THE DELEGATE ASSEMBLY.

FORM 990, PART VI, SECTION A, LINE 6:

BOARD MEMBERS THROUGHOUT THE STATE WHOSE DISTRICTS AND/OR COUNTY OFFICES OF EDUCATION ARE MEMBERS OF CSBA, ELECT BOARD MEMBERS TO SERVE AS DELEGATES TO CSBA'S DELEGATE ASSEMBLY. THE DELEGATES THEN ELECT THE MEMBERS OF THE BOARD OF DIRECTORS AS WELL AS THE OFFICERS OF THE ASSOCIATION.

Name of the organization

CALIFORNIA SCHOOL BOARDS ASSOCIATION

Employer identification number 94-1510492

FORM 990, PART VI, SECTION A, LINE 7A:

SEE EXPLANATION TO PART VI, LINE 6.

FORM 990, PART VI, SECTION A, LINE 7B:

THE PRESIDENT MAKES APPOINTMENTS TO COMMITTEES AND TASK FORCES; THESE

APPOINTMENTS ARE BROUGHT TO THE EXECUTIVE COMMITTEE FOR APPROVAL AND THEN

TO THE BOARD OF DIRECTORS FOR RATIFICATION. DECISIONS BY THE OFFICERS ARE

REPORTED TO THE BOARD. THE MAJORITY OF DECISIONS ARE MADE BY THE BOARD OF

DIRECTORS, INCLUDING THE ADOPTION OF THE ASSOCIATION'S ANNUAL BUDGET. THE

DELEGATE ASSEMBLY ALSO MAKES DECISIONS SURROUNDING SUCH ISSUES AS BALLOT

MEASURES AND POLICY POSITIONS.

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

FORM 990 WILL BE REVIEWED PRIOR TO FILING OF THE FORM 990. THE APPROPRIATE

ASSOCIATION STAFF WILL REVIEW ALL DOCUMENTS PRIOR TO DISCUSSION AND REVIEW

WITH THE CSBA BOARD OF DIRECTORS.

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

THE CONFLICT OF INTEREST POLICY APPLIES TO ALL CSBA OFFICERS, DIRECTORS,

KEY EMPLOYEES, CERTAIN FORMER EMPLOYEES, AND SPECIFIED INDEPENDENT

CONTRACTORS, AS WELL AS THE OFFICERS, DIRECTORS, KEY EMPLOYEES, CERTAIN

FORMER EMPLOYEES, AND SPECIFIED INDEPENDENT CONTRACTORS OF RELATED

ORGANIZATIONS SUCH AS CSBADSC, CSBAFC, AND CSB FOUNDATION. ALL OFFICERS,

DIRECTORS, KEY EMPLOYEES, CERTAIN FORMER EMPLOYEES, AND SPECIFIED

INDEPENDENT CONTRACTORS ARE REQUIRED TO SUBMIT ANNUALLY A DISCLOSURE

STATEMENT TO THE CSBA GENERAL COUNSEL. THE GENERAL COUNSEL, CSBA CHIEF

FINANCIAL OFFICER, CSBA CEO/EXECUTIVE, CSBA PRESIDENT, AND THE PRESIDENT OF

THE BOARD OF DIRECTORS OF EACH RELATED ENTITY REVIEW THE STATEMENTS FOR ANY

Name of the organization CALIFORNIA SCHOOL BOARDS ASSOCIATION

| Employer identification number 94-1510492

FACTS OR CIRCUMSTANCES THAT MAY REFLECT AN ACTUAL, POTENTIAL OR APPARENT

CONFLICT OF INTEREST. UPON REVIEW OF EACH DISCLOSURE STATEMENT, THE CSBA

PRESIDENT AND CSBA GENERAL COUNSEL WILL DISCLOSE ANY IDENTIFIED ACTUAL,

POTENTIAL OR APPARENT CONFLICTS OF INTEREST TO THE CSBA BOARD OF DIRECTORS

OR TO THE DIRECTORS OF THE BOARD OF ANY RELATED ENTITY, WITH A

RECOMMENDATION AS TO POSSIBLE ACTION. THE BOARD(S) WILL THEN DETERMINE

APPROPRIATE ACTION.

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

THE COMPENSATION REVIEW COMMITTEE IS COMPOSED OF THE CHAIR OF THE AUDIT COMMITTEE, A MEMBER OF THE AUDIT COMMITTEE, THE CHAIR OF THE FINANCE COMMITTEE, TWO MEMBERS FROM THE BOARD OF DIRECTORS APPOINTED BY THE CSBA PRESIDENT, AND THE IMMEDIATE PAST PRESIDENT OF THE BOARD OF DIRECTORS. THE CHAIR OF THE COMMITTEE IS APPOINTED BY THE PRESIDENT AND APPROVED BY THE BOARD OF DIRECTORS. THE VICE CHAIR IS SELECTED BY THE COMMITTEE. THE COMMITTEE REVIEWS THE COMPENSATION FOR THE EXECUTIVE DIRECTOR OF CSBA. THE COMMITTEE MEETS TO REVIEW THEIR PROTOCOL AND DATA ASSEMBLED FROM COMPARABLE ASSOCIATIONS WITH SIMILAR REVENUE AND EMPLOYEE BASE, DATA ASSEMBLED BY THE NATIONAL SCHOOL BOARDS ASSOCIATION, AND GENERAL DATA FROM COMPARABLE NOT-FOR-PROFIT AND FOR-PROFIT BASED ORGANIZATIONS. IN THE EVENT OF A SALARY ADJUSTMENT FOR THE CEO/EXECUTIVE DIRECTOR, THE COMMITTEE FORWARDS A WRITTEN RECOMMENDATION TO THE EXECUTIVE COMMITTEE FOR REVIEW. THE EXECUTIVE COMMITTEE THEN PREPARES ITS RECOMMENDATION AND MEETS IN EXECUTIVE SESSION WITH THE BOARD OF DIRECTORS. A FINAL DECISION IS RENDERED BY MAJORITY VOTE OF THE BOARD. ANY RECOMMENDATION BY THE COMPENSATION COMMITTEE ON COMPENSATION IS SHARED WITH THE FULL BOARD AS WELL.

Name of the organization  CALIFORNIA SCHOOL BOARDS ASSOCIATION	Employer identification number 94-1510492
FORM 990S ARE POSTED ON THE CSBA WEBSITE, AS WELL AS CER	TAIN OTHER
DOCUMENTS, AND ALL ARE ALSO AVAILABLE UPON REQUEST.	
FORM 990, PART XII, LINE 2C	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	

#### 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.

Department of the Treasury Internal Revenue Service

Name of the organization

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

2020 Open to Public Inspection

OMB No. 1545-0047

CALIFORNIA SCHOOL BOARDS ASSOCIATION

Employer identification number 94-1510492

Part I Identification of Disregarded Entities. Complet	e if the organization answered "Yes" o	n Form 990, Part IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
CALIFORNIA SCHOOL BOARDS FOUNDATION -	PROVIDE TRAINING AND				CALIFORNIA SCHOOL		
94-1623582, 3251 BEACON BLVD., WEST	SUPPORT SCHOOL BOARD				BOARDS		l
SACRAMENTO, CA 95691	MEMBERS	CALIFORNIA	501(C)(3)	LINE 7	ASSOCIATION		Х
CALIFORNIA SCHOOL BOARDS FINANCE CORPORATION					CALIFORNIA SCHOOL		
- 68-0138865, 3251 BEACON BLVD., WEST	FINANCIAL ASSISTANCE TO				BOARDS		i
SACRAMENTO, CA 95691	EDUCATIONAL BODIES	CALIFORNIA	501(C)(4)		ASSOCIATION		Х
CALIFORNIA SCHOOL BOARDS ASSOCIATION					CALIFORNIA SCHOOL		
DISTRICT SERVICES CORP - 68-0371170, 3251	PROVIDE SUPPORT TO SCHOOL				BOARDS		i
BEACON BLVD., WEST SACRAMENTO, CA 95691	DISTRICTS	CALIFORNIA	501(C)(4)		ASSOCIATION		Х
FULL AND FAIR FUNDING - 84-2052805	ENGAGE IN RESEARCH, PUBLIC						
555 CAPITOL MALL, SUITE 400	EDUCATION, ADVOCACY FOR CA						l
SACRAMENTO, CA 95814	PUBLIC SCHOOL FUNDING	CALIFORNIA	501(C)(4)		N/A		Х

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

Schedule R (Form 990) 2020

Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign		Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of end-of-year assets	Disprop alloca			Genera	orPercentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	lo
											<u> </u>

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i) tion
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	CIIL	
		country)		, , , , , , , , , , , , , , , , , , ,				Yes	No
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Schedule R (Form 990) 2020

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Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

1	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity								
b	b Gift, grant, or capital contribution to related organization(s)								
С	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)									
							Х		
h Purchase of assets from related organization(s)  i Exchange of assets with related organization(s)									
					1g		Х		
h	Purchase of assets from related organization(s)				1h		Х		
i	Exchange of assets with related organization(s)				1i		Х		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х		
k	k Lease of facilities, equipment, or other assets from related organization(s)								
- 1	I Performance of services or membership or fundraising solicitations for related organization(s)								
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p		Х		
	Reimbursement paid by related organization(s) for expenses				1q	X			
r	Other transfer of cash or property to related organization(s)				1r		Х		
	Other transfer of cash or property from related organization(s)				1s		Х		
2	If the answer to any of the above is "Yes," see the instructions for information on who mu	ıst complete th	is line, including covered	relationships and transaction thresholds.					
	(a) Name of related organization  (b) Transaction type (a-s)  (c) Amount involved Method of determining amount inv								
	CALIFORNIA SCHOOL BOARDS ASSOCIATION								
(1)	DISTRICT SERVICES CORP	N	84,057.	ACTUAL COST					
	CALIFORNIA SCHOOL BOARDS ASSOCIATION								

(2) FINANCE CORPORATION 57,264. ACTUAL COST N CALIFORNIA SCHOOL BOARDS ASSOCIATION (3) DISTRICT SERVICES CORP С 500,000.ACTUAL COST CALIFORNIA SCHOOL BOARDS ASSOCIATION (4) FINANCE CORPORATION 500,000.ACTUAL COST С (5) (6)

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) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e)	(f)	(g)	(ł	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related_unrelated	partners s	Share of	Share of	Dispri	opor- iate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag	Percentag
of entity		(state or foreign country)	excluded from tax under	orgs.?	total income	end-of-year assets	allocat	ions?	of Schedule K-1	partne	r? ownersnip
		Country)	Sections 5 (2-5 (4)	Yes N	o mcome	assets	Yes	No	(F01111 1065)	Yes I	10
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