

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2008, or tax year beginning JUL 1, 2008, and ending JUN 30, 2009

2008

Department of the Treasury Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

See instructions.

Name of exempt organization GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.

Employer identification number 53-0242992

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return, if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Form with rows 1a-5a and 1b-5b for reporting revenue, tax, and balance due.

Part II Declaration of Officer

6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return...

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2008 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete.

Sign Here [Signature] Date 8/23/2010 Title SR VP, TREAS & CFO

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return.

Form fields for ERO's signature, date, firm name (BDO SEIDMAN, LLP), address, EIN, and phone number.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Form fields for Paid Preparer's signature, date, firm name, address, EIN, and phone number.

Form **990**

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

# 2008

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A For the 2008 calendar year, or tax year beginning** JUL 1, 2008 **and ending** JUN 30, 2009

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type.  See Specific Instructions.	<b>C Name of organization</b>		<b>D Employer identification number</b>
		GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.		53-0242992
		Doing Business As WETA		<b>E Telephone number</b>
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2775 SOUTH QUINCY STREET		(703) 998-2600
City or town, state or country, and ZIP + 4 ARLINGTON, VA 22206-2269		<b>G Gross receipts \$</b> 97,904,551.	<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>F Name and address of principal officer:</b> SHARON PERCY ROCKEFELLER SAME AS C ABOVE		<b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>H(c) Group exemption number</b> ▶
<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
<b>J Website:</b> ▶ WWW.WETA.ORG				
<b>K Type of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L Year of formation:</b> 1953	<b>M State of legal domicile:</b> DC

Part I Summary		Prior Year	Current Year
Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: PUBLIC TELEVISION AND RADIO BROADCASTING AND PRODUCTION; PBS AFFILIATE AND CLASSICAL MUSIC.		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	27
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	25
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	270
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	298
	<b>7a</b> Total gross unrelated business revenue from Part VIII, line 12, column (C)	<b>7a</b>	245,919.
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	170,349.	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	74,935,355.	85,687,030.
	<b>9</b> Program service revenue (Part VIII, line 2g)	6,162,769.	1,027,735.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,879,488.	-2,573,106.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	422,521.	655,800.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	83,400,133.	84,797,459.
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	490,500.	348,986.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,954,442.	21,671,872.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	1,075,758.	994,055.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 10,413,887.		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	56,213,424.	44,667,120.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	78,734,124.	67,682,033.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	4,666,009.	17,115,426.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Year</b> 119,609,077.	<b>End of Year</b> 132,291,421.
	<b>21</b> Total liabilities (Part X, line 26)	20,762,204.	19,080,763.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	98,846,873.	113,210,658.

<b>Part II Signature Block</b>				
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.				
Sign Here	▶ Signature of officer	Date		
	POLLY POVEJSIL HEATH, SR VP, TREAS & CFO Type or print name and title			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	BDO SEIDMAN, LLP 7101 WISCONSIN AVE., SUITE 800 BETHESDA, MD 20814-4827	EIN ▶	Phone no. ▶ (301) 654-4900

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

WETA'S MISSION IS TO PRODUCE AND BROADCAST PROGRAMS OF INTELLECTUAL INTEGRITY AND CULTURAL MERIT THAT RECOGNIZE VIEWERS' AND LISTENERS' INTELLIGENCE, CURIOSITY AND INTEREST IN THE WORLD AROUND THEM.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

Yes No

If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

Yes No

If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 2,939,480. including grants of \$ ) (Revenue \$ ) RADIO: CLASSICAL WETA BROADCASTS ON WETA 90.9 FM, WGMS 89.1 FM AND WETA 88.9 FM, PROVIDING A 24 HOUR CLASSICAL MUSIC SERVICE. WETA IS THE EXCLUSIVE BROADCASTER OF CLASSICAL MUSIC TO THE METROPOLITAN WASHINGTON AREA. CLASSICAL WETA 90.9 FM PROVIDES AN IMPORTANT CONNECTION BETWEEN MANY FINE PERFORMING ARTS ORGANIZATIONS IN THE AREA AND THE COMMUNITY THROUGH PARTNERSHIPS TO RECORD AND BROADCAST CONCERTS, PROMOTE EVENTS, AND BY HIGHLIGHTING THE RICH CULTURAL OFFERINGS OF OUR REGION.

4b (Code: ) (Expenses \$ 10,516,229. including grants of \$ ) (Revenue \$ ) TELEVISION: WETA IS THE MAJOR PUBLIC TELEVISION BROADCASTER IN THE GREATER WASHINGTON AREA. WETA OFFERS QUALITY TELEVISION PROGRAMMING ON TV CHANNEL 26 AND FOUR DIGITAL CHANNELS: WETA HD, WETA FAMILY, WETA CREATE, AND WETA WORLD. WETA DEVOTES 45 PERCENT OF THE TV 26 WEEKDAY SCHEDULE TO PROGRAMS THAT DELIGHT AND EDUCATE CHILDREN. THE STATION OFFERS VIEWERS ANALYSIS OF IMPORTANT ISSUES BY DEVOTING 30 HOURS EACH WEEK OF THE TV 26 SCHEDULE TO NEWS AND PUBLIC AFFAIRS PROGRAMMING.

4c (Code: ) (Expenses \$ 35,924,461. including grants of \$ 348,986. ) (Revenue \$ ) TELEVISION PRODUCTION: WETA IS THE THIRD LARGEST PRODUCING STATION IN THE PUBLIC BROADCASTING SYSTEM, DELIVERING PROGRAMS SUCH AS WASHINGTON WEEK, THE NEWSHOUR WITH JIM LEHRER, AND KEN BURNS' DOCUMENTARIES. WETA ALSO PRODUCES SPECIALS THAT ADDRESS CURRENT TOPICS AND ISSUES BOTH LOCALLY AND NATIONALLY.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 6,961,509. including grants of \$ ) (Revenue \$ )

4e Total program service expenses \$ 56,341,679. (Must equal Part IX, Line 25, column (B).)

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors? .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> .....	X	
<b>5</b> <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i> .....		
<b>6</b> Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
<b>10</b> Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	X	
<b>11</b> Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> .....	X	
<b>12</b> Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> .....	X	
<b>13</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the U.S.? .....		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i> .....		X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> .....		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> .....		X
<b>17</b> Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i> .....	X	
<b>18</b> Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
<b>19</b> Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
<b>20</b> Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....		X
<b>21</b> Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<b>22</b> Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> .....		X

**Part IV Checklist of Required Schedules** (continued)

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....	X	
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....	X	
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X

Form 990 (2008)

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	243		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	0		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	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		
	270		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
<b>4a</b>	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)?		X
<b>4b</b>	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</b>	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible?		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
<b>7h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter: N/A		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter: N/A		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		

**Part VI Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body		
<b>1b</b>	Enter the number of voting members that are independent		
<b>2</b>	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?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets?		X
<b>6</b>	Does the organization have members or stockholders?		X
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
<b>7b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9a</b>	Does the organization have local chapters, branches, or affiliates?		X
<b>9b</b>	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
<b>10</b>	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990		X
<b>11</b>	Is there any officer, director or 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 in Schedule O		X

**Section B. Policies**

		Yes	No
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
<b>13</b>	Does the organization have a written whistleblower policy?	X	
<b>14</b>	Does the organization have a written document retention and destruction policy?	X	
<b>15</b>	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:		
<b>15a</b>	The organization's CEO, Executive Director, or top management official?	X	
<b>15b</b>	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	X	
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **VA, MD, DC**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **MEGHAN BIGGS, CONTROLLER - (703) 998-2600**  
**2775 SOUTH QUINCY STREET, ARLINGTON, VA 22206-2269**

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LESLEE ALEXANDER TRUSTEE	1.00	X					0.	0.	0.	
PAUL ANTHONY TRUSTEE, ON AIR ANNOUNCER	2.00	X					21,734.	0.	2,667.	
CYNTHIA BAKER TRUSTEE	1.00	X					0.	0.	0.	
MARGUERITE BATEMAN TRUSTEE	1.00	X					0.	0.	0.	
STEPHEN F. BLACK TRUSTEE	1.00	X					0.	0.	0.	
M. DIANE BODMAN TRUSTEE	1.00	X					0.	0.	0.	
KARNA SMALL BODMAN TRUSTEE	1.00	X					0.	0.	0.	
GAHL HODGES BURT TRUSTEE	1.00	X					0.	0.	0.	
ARMANDO CHAPELLI TRUSTEE	1.00	X					0.	0.	0.	
LAVERN JACKSON CHATMAN TRUSTEE	1.00	X					0.	0.	0.	
TIMOTHY C. COUGHLIN CHAIRMAN, TRUSTEE	1.00	X		X			0.	0.	0.	
LISA CLAIRE DWOSKIN TRUSTEE	1.00	X					0.	0.	0.	
ANN B. FRIEDMAN TRUSTEE	1.00	X					0.	0.	0.	
JOHN W. HECHINGER, JR. VICE CHAIRMAN, TRUSTEE	1.00	X		X			0.	0.	0.	
J. RODERICK HELLER, III TRUSTEE EMERITUS	1.00	X					0.	0.	0.	
ANN DIBBLE JORDAN VC & SEC, TRUSTEE	1.00	X		X			0.	0.	0.	
MAX M. KAMPELMAN TRUSTEE EMERITUS	1.00	X					0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ROGER KRONE TRUSTEE	1.00	X						0.	0.	0.
DAVID O. MAXWELL TRUSTEE EMERITUS	1.00	X						0.	0.	0.
DANIEL K. MAYERS TRUSTEE EMERITUS	1.00	X						0.	0.	0.
ROBERT PECK TRUSTEE	1.00	X						0.	0.	0.
IAN K. PORTNOY TRUSTEE	1.00	X						0.	0.	0.
EDWARD HART RICE TRUSTEE	1.00	X						0.	0.	0.
JAYE ROGOVIN TRUSTEE	1.00	X						0.	0.	0.
ALISON K. RUSSELL TRUSTEE	1.00	X						0.	0.	0.
FRED RYAN TRUSTEE	1.00	X						0.	0.	0.
BRUCE SANFORD TRUSTEE	1.00	X						0.	0.	0.
<b>1b Total</b>								2,484,733.	0.	325,236.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 43

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
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	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
AUTOMATED MAILING, INC. 4407 WHEELER AVE, ALEXANDRIA, VA 22304	DIRECT MAIL PROCESSING	941,398.
DIRECT ADVANTAGE MARKETING P O BOX 55043, BOSTON, MA 02205	TELEMARKETING	586,352.
NATIONAL JOURNAL GROUP, INC., 600 NEW HAMPSHIRE AVE NW, WASHINGTON, DC 20037	FUNDRAISING	403,646.
THE MASLOW GROUP, INC. P.O. BOX 1913, MERRIFIELD, VA 22116	STAFFING	402,676.
PUBLIC INTEREST COMMUNICATION, INC., 7700 LEESBURG PIKE STE 301 N, FALLS CHURCH, VA	PROMOTION SERVICES	274,665.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 27

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns .....	1a	333,162.				
	b	Membership dues .....	1b					
	c	Fundraising events .....	1c					
	d	Related organizations .....	1d					
	e	Government grants (contributions)	1e	2,309,289.				
	f	All other contributions, gifts, grants, and similar amounts not included above .....	1f	83,044,579.				
	g	Noncash contributions included in lines 1a-1f: \$		11,956.				
	h	<b>Total.</b> Add lines 1a-1f .....			85,687,030.			
	Program Service Revenue			Business Code				
2 a		ANCILLARY REVENUES	900099	427,254.	427,254.			
b		TELEVISION PROJECTS	900099	203,724.	203,724.			
c		PRODUCTION STUDIO RENT	900002	199,178.	199,178.			
d		RADIO STUDIO RENTAL	900002	86,562.	86,562.			
e		RENT 501(C)3 TENANTS	900002	79,713.	79,713.			
f		All other program service revenue .....	900099	31,304.	31,304.			
g	<b>Total.</b> Add lines 2a-2f .....			1,027,735.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) .....		537,306.			537,306.	
	4	Income from investment of tax-exempt bond proceeds .....						
	5	Royalties .....		303,711.	303,711.			
	6 a	Gross Rents .....	(i) Real	(ii) Personal				
			856,200.					
			708,724.	-17,729.				
	b	Less: rental expenses .....						
	c	Rental income or (loss) .....		147,476.	17,729.			
	d	Net rental income or (loss) .....			165,205.	182,286.	-17,081.	
	7 a	Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other				
			9,229,709.					
			12,331,945.	8,176.				
	b	Less: cost or other basis and sales expenses .....						
	c	Gain or (loss) .....		-3,102,236.	-8,176.			
	d	Net gain or (loss) .....			-3,110,412.		-3,110,412.	
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	a					
	b	Less: direct expenses .....	b					
c	Net income or (loss) from fundraising events .....							
9 a	Gross income from gaming activities. See Part IV, line 19 .....	a						
b	Less: direct expenses .....	b						
c	Net income or (loss) from gaming activities .....							
10 a	Gross sales of inventory, less returns and allowances .....	a	176,130.					
b	Less: cost of goods sold .....	b	75,976.					
c	Net income or (loss) from sales of inventory .....			100,154.	100,154.			
Miscellaneous Revenue		Business Code						
11 a	WETA MAGAZINE	511120	63,633.		63,633.			
b	LIST RENTAL	900002	22,877.			22,877.		
c								
d	All other revenue .....	900099	220.	220.				
e	<b>Total.</b> Add lines 11a-11d .....			86,730.				
12	<b>Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e .....			84,797,459.	1,431,820.	245,919.	-2,567,310.	

**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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....	348,986.	348,986.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	2,785,558.	1,095,170.	1,047,497.	642,891.
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 .....	14,866,762.	11,660,926.	417,420.	2,788,416.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	1,106,176.	755,318.	141,318.	209,540.
9 Other employee benefits .....	1,699,925.	1,434,505.	16,104.	249,316.
10 Payroll taxes .....	1,213,451.	828,568.	155,022.	229,861.
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	93,969.	1,063.	92,490.	416.
c Accounting .....	125,584.	85,778.	16,033.	23,773.
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17 .....	994,055.			994,055.
f Investment management fees .....	50,937.		50,937.	
g Other .....	3,807,400.	3,070,685.	99,611.	637,104.
12 Advertising and promotion .....	496,977.	467,592.	5.	29,380.
13 Office expenses .....	4,742,969.	3,100,296.	123,414.	1,519,259.
14 Information technology .....				
15 Royalties .....				
16 Occupancy .....	816,526.		816,526.	
17 Travel .....	573,161.	419,711.	3,924.	149,526.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings .....	306,850.	223,927.	11,045.	71,878.
20 Interest .....	522,758.	522,758.		
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	3,338,117.	3,189,329.	58,586.	90,202.
23 Insurance .....	259,163.	177,361.	32,948.	48,854.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) .....				
a PRODUCTION COSTS	23,609,232.	23,459,529.	12,281.	137,422.
b PBS AND NPR DUES	3,617,406.	3,617,406.		
c MISCELLANEOUS	2,563,356.	297,348.	34,762.	2,231,246.
d TAX EXPENSE	379,360.	379,360.		
e MEMBERSHIPS AND AFFILIA	148,052.	30,032.	93,325.	24,695.
f All other expenses	-784,697.	1,176,031.	-2,296,781.	336,053.
25 Total functional expenses. Add lines 1 through 24f	67,682,033.	56,341,679.	926,467.	10,413,887.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing .....		1	
	2 Savings and temporary cash investments .....	10,082,232.	2	13,326,676.
	3 Pledges and grants receivable, net .....	497,773.	3	601,800.
	4 Accounts receivable, net .....	47,370,934.	4	58,826,703.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L .....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....	224,811.	8	208,539.
	9 Prepaid expenses and deferred charges .....	4,670,693.	9	2,800,042.
	10a Land, buildings, and equipment: cost basis ...	10a 52,399,248.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D .....	10b 31,168,309.		
			23,795,264.	10c 21,230,939.
	11 Investments - publicly traded securities .....	18,673,240.	11	11,754,007.
	12 Investments - other securities. See Part IV, line 11 .....	5,929,783.	12	4,444,075.
	13 Investments - program-related. See Part IV, line 11 .....		13	2,519,340.
	14 Intangible assets .....		14	
15 Other assets. See Part IV, line 11 .....	8,364,347.	15	16,579,300.	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	119,609,077.	16	132,291,421.	
Liabilities	17 Accounts payable and accrued expenses .....	6,008,997.	17	5,539,394.
	18 Grants payable .....		18	
	19 Deferred revenue .....	677,137.	19	646,483.
	20 Tax-exempt bond liabilities .....	9,898,333.	20	9,468,333.
	21 Escrow account liability. Complete Part IV of Schedule D .....		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....	3,508,285.	23	2,560,000.
	24 Unsecured notes and loans payable .....		24	
	25 Other liabilities. Complete Part X of Schedule D .....	669,452.	25	866,553.
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	20,762,204.	26	19,080,763.
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets .....	21,625,394.	27	17,211,332.
	28 Temporarily restricted net assets .....	67,516,058.	28	86,343,905.
	29 Permanently restricted net assets .....	9,705,421.	29	9,655,421.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds .....		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32 Retained earnings, endowment, accumulated income, or other funds .....		32	
33 <b>Total net assets or fund balances</b> .....	98,846,873.	33	113,210,658.	
34 <b>Total liabilities and net assets/fund balances</b> .....	119,609,077.	34	132,291,421.	

**Part XI Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....	2a	X
b Were the organization's financial statements audited by an independent accountant? .....	2b	X
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....	3a	X
b If "Yes," did the organization undergo the required audit or audits? .....	3b	X

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

**2008**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

**Name of the organization** GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC. **Employer identification number** 53-0242992

**Part I Reason for Public Charity Status** (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III - Functionally integrated
  - d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....	11g(i)	
(ii) A family member of a person described in (i) above? .....	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....	11g(iii)	
- h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	63,579,840.	65,220,453.	79,960,737.	74,935,355.	85,687,030.	369,383,415.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 - 3 .....	63,579,840.	65,220,453.	79,960,737.	74,935,355.	85,687,030.	369,383,415.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						11,253,264.
<b>6 Public Support.</b> Subtract line 5 from line 4.						358,130,151.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4 .....	63,579,840.	65,220,453.	79,960,737.	74,935,355.	85,687,030.	369,383,415.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	747,094.	969,824.	892,905.	1,112,444.	658,350.	4,380,617.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....		111,793.	103,547.	109,315.	171,349.	496,004.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	268,743.	73,066.	39,730.	54,772.	86,510.	522,821.
<b>11 Total support.</b> Add lines 7 through 10						374,782,857.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	20,553,907.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	95.56 %
<b>15</b> Public support percentage from 2007 Schedule A, Part IV-A, line 26f .....	<b>15</b>	82.30 %
<b>16a 33 1/3% support test - 2008.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2007.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2008.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2007.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)** (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>6 Total.</b> Add lines 1 - 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2008</b> (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2007</b> Schedule A, Part IV-A, line 27h .....	<b>18</b>	%

**19a 33 1/3% support tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS

Multiple horizontal lines for providing supplemental information.

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

**2008**

**Name of the organization**

GREATER WASHINGTON EDUCATIONAL  
TELECOMMUNICATIONS ASSOCIATION, INC.

**Employer identification number**

53-0242992

**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

**General Rule**

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ..... ▶ \$ \_\_\_\_\_

**Caution.** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

<b>Name of organization</b> GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.	<b>Employer identification number</b> 53-0242992
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 3,551,997.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 22,765,775.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 13,170,122.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 3,559,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**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

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

▶ **To be completed by organizations described below.**  
▶ **Attach to Form 990 or Form 990-EZ.**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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," to 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," to Form 990, Part IV, line 5 (Proxy Tax), then**

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

Name of organization GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.	Employer identification number 53-0242992
--	--

**Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.**

See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours .....

**Part I-B To be completed by all organizations exempt under section 501(c)(3).**

See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).**

See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527  
exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on  
Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made.  
Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and  
promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC).  
If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

**Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

- A** Check  if the filing organization belongs to an affiliated group.  
**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. Enter -0- if line g is more than line a .....														
<b>i</b> Subtract line 1f from line 1c. Enter -0- if line f is more than line c .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
<b>2a</b> Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots non-taxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....	X		
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....		X	
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		28,498.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? .....		X	
<b>i</b> Other activities? If "Yes," describe in Part IV .....		X	
<b>j</b> Total lines 1c through 1i .....			28,498.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** See the instructions for Schedule C for details.

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	2	
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year? .....	3	

**Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** See Schedule C instructions for details.

<b>1</b> Dues, assessments and similar amounts from members .....	1	
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	2a	
<b>b</b> Carryover from last year .....	2b	
<b>c</b> Total .....	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	4	
<b>5</b> Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) .....	5	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

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**Schedule D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No. 1545-0047

**2008**

**Open to Public Inspection**

**Name of the organization** GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.

**Employer identification number**  
53-0242992

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (e.g., recreation or pleasure)       Preservation of an historically important land area  
 Protection of natural habitat       Preservation of certified historic structure  
 Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06 .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? .....  Yes  No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ..... ▶ \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X ..... ▶ \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ..... ▶ \$ \_\_\_\_\_
- b Assets included in Form 990, Part X ..... ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3** Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other \_\_\_\_\_
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Trust, Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance .....             | <b>1c</b> |
| <b>d</b> Additions during the year .....     | <b>1d</b> |
| <b>e</b> Distributions during the year ..... | <b>1e</b> |
| <b>f</b> Ending balance .....                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....	27,550,302.				
<b>b</b> Contributions .....	2,125,000.				
<b>c</b> Investment earnings or losses .....	-5,151,036.				
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....	1,143,534.				
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....	23,380,732.				

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment ▶ 38.90 %
  - b** Permanent endowment ▶ 37.02 %
  - c** Term endowment ▶ 24.08 %

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes           | No |
|--|---------------|----|
| <b>(i)</b> unrelated organizations .....   | <b>3a(i)</b>  | X  |
| <b>(ii)</b> related organizations .....  | <b>3a(ii)</b> | X  |
| <b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ..... | <b>3b</b>     |    |

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
<b>1a</b> Land .....		2,227,039.		2,227,039.
<b>b</b> Buildings .....		8,924,944.	3,831,426.	5,093,518.
<b>c</b> Leasehold improvements .....		9,080,164.	4,083,232.	4,996,932.
<b>d</b> Equipment .....		32,151,468.	23,253,651.	8,897,817.
<b>e</b> Other .....		15,633.		15,633.
<b>Total.</b> Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) .....				21,230,939.



**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	84,797,459.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	67,682,033.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	17,115,426.
4	Net unrealized gains (losses) on investments	4	-2,579,289.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-172,352.
9	Total adjustments (net). Add lines 4-8	9	-2,751,641.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	14,363,785.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	82,779,581.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-2,579,289.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-197,101.
e	Add lines 2a through 2d	2e	-2,776,390.
3	Subtract line 2e from line 1	3	85,555,971.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	50,937.
b	Other (Describe in Part XIV)	4b	-809,449.
c	Add lines 4a and 4b	4c	-758,512.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	84,797,459.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	68,415,796.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	68,415,796.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	50,937.
b	Other (Describe in Part XIV)	4b	-784,700.
c	Add lines 4a and 4b	4c	-733,763.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	67,682,033.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART V, LINE 4: WETA'S ENDOWMENT IS INTENDED TO SUPPORT PROGRAMMING

ACTIVITIES THROUGH AN ANNUAL FUNDING SUPPLEMENT AND/OR APPROPRIATIONS FOR

SPECIAL PROGRAM PROJECTS.

PART X: WETA HAS ADOPTED THE PROVISIONS OF FASB INTERPRETATION

NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, (FIN 48). UNDER FIN

48, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX

POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE-LIKELY-THAN-NOT

**Part XIV** Supplemental Information (continued)

THAT THE POSITION WILL BE SUSTAINED. WETA DOES NOT BELIEVE THERE ARE ANY  
MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT WILL NOT RECOGNIZE  
ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

CHANGE IN MARKET VALUE OF INTEREST RATE SWAP: -197101.

BOOK TO TAX DIFFERENCE ON PASSTHROUGH INTERESTS: 24749.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN MARKET VALUE OF INTEREST RATE SWAP: -197101.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

COST OF GOODS SOLD (SALE OF INVENTORY): -75976.

BOOK TO TAX ASJUSTMENT FOR INCOME FROM PASSTHROUGH INTERESTS: -24749.

EXPENSES RELATED TO RENTAL INCOME: -708724.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

COST OF GOODS SOLD (SALE OF INVENTORY): -75976.

EXPENSES RELATED TO RENTAL INCOME: -708724.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

OMB No. 1545-0047

**2008**

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Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.**

Name of the organization **GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.** Employer identification number **53-0242992**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
PUBLIC INTEREST COMMUNICATIONS	TELEMARKETING		X	1,466,115.	436,851.	0.
DIRECT ADVANTAGE MARKETING	TELEMARKETING		X	1,080,620.	321,987.	0.
CARL BLOOM ASSOCIATES	DATABASES FOR DIRECT MAIL		X	763,979.	227,639.	0.
THE SHARON GROUP	CONSULTING SERVICES		X	374,134.	111,479.	0.
SD&A TELESERVICES, INC.	TELEMARKETING		X	243,075.	72,428.	0.
MCPHERSON ASSOCIATES, INC.	CONSULTING SRV. ONLINE FUNDRAISING		X	172,077.	51,273.	0.
<b>Total</b>				<b>4,100,000.</b>	<b>1,221,657.</b>	

**3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.  
VA, MD, DC

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts .....			
	2	Less: Charitable contributions .....			
	3	Gross revenue (line 1 minus line 2) .....			
Direct Expenses	4	Cash prizes .....			
	5	Non-cash prizes .....			
	6	Rent/facility costs .....			
	7	Other direct expenses .....			
	8	Direct expense summary. Add lines 4 through 7 in column (d) .....			( )
	9	Net income summary. Combine lines 3 and 8 in column (d) .....			( )

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Revenue	1	Gross revenue .....			
	2	Cash prizes .....			
Direct Expenses	3	Non-cash prizes .....			
	4	Rent/facility costs .....			
	5	Other direct expenses .....			
	6	Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d) .....			( )
	8	Net gaming income summary. Combine lines 1 and 7 in column (d) .....			( )

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states? .....	9a	
b If "No," Explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? .....	10a	
b If "Yes," Explain: _____		
11 Does the organization operate gaming activities with nonmembers? .....	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? .....	12	

**13** Indicate the percentage of gaming activity operated in:

<b>a</b> The organization's facility .....	<b>13a</b>	%
<b>b</b> An outside facility .....	<b>13b</b>	%

**14** Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? .....

**b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_ .

**c** If "Yes," enter name and address:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

**16** Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Director/officer       Employee       Independent contractor

**17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? .....

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

	Yes	No
<b>13a</b>		
<b>13b</b>		
<b>14</b>		
<b>15a</b>		
<b>16</b>		
<b>17a</b>		

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the U.S.**

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.  
▶ Attach to Form 990.**

OMB No. 1545-0047

2008

**Open to Public  
Inspection**

Name of the organization **GREATER WASHINGTON EDUCATIONAL  
TELECOMMUNICATIONS ASSOCIATION, INC.**

**Employer identification number**  
53-0242992

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
KNME-TV 5 (UNIV OF NEW MEXICO) 1200 UNIVERSITY ALBUQUERQUE, NM 87102	85-6000642		24,999.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
KPBS 5250 CAMPANILE DR SAN DIEGO, CA 92182	95-6042721		24,999.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
KRCB TV-22 5850 LABATH AVE ROHNERT PARK, CA 94928	94-2718837		25,000.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
KUED TV (UNIV OF UTAH) 101 S. WASATCH DRIVE, ROOM 215 SALT LAKE CITY, UT 84112	87-6000525		25,000.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
KUON-TV 1800 N. 33RD STREET LINCOLN, NE 68503	47-0049123		25,000.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
VERMONT PUBLIC TELEVISION 204 ETHAN ALLEN AVENUE COLCHESTER, VT 05446	22-2900644		25,000.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT

- 2** Enter total number of section 501(c)(3) and government organizations ..... ▶ 16.
- 3** Enter total number of other organizations ..... ▶

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

Schedule I (Form 990) 2008

**Part III** **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
 Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: WETA MONITORS THE USE OF GRANT FUNDS BY

REQUIRING INTERIM AND FINAL PERFORMANCE REPORTING IN BOTH NARRATIVE AND

FINANCIAL FORM FROM GRANT RECIPIENT.

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047

2008

**Open to Public  
Inspection**

Name of the organization **GREATER WASHINGTON EDUCATIONAL  
TELECOMMUNICATIONS ASSOCIATION, INC.**

**Employer identification number**  
53-0242992

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHRO 5200 HAMPTON BLVD NORFOLK, VA 23508-1507	54-0843118		20,468.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
WITF INC 4801 LINDLE ROAD HARRISBURG, PA 17111	23-1629016		25,000.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
WUSF-UNIV OF S. FLORIDA 4202 E. FOWLER AVE, ADM147 TAMPA, FL 33620	59-3102112		25,000.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
WXXI PUBLIC BROADCASTING COUNCIL 280 STATE STREET, P.O. BOX 30021 ROCHESTER, NY 14603-3021	16-0838086		25,000.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
KNPB CHANNEL 5 1670 N VIRGINIA STREET RENO, NV 89503	88-0172215		24,068.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
OETA FOUNDATION, INC P.O. BOX 14190 OKLAHOMA CITY, OK 73113-0190	73-1175503		20,616.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
SC EDUCATIONAL TV COMMISSION 1101 GEORGE ROGERS BLVD COLUMBIA, SC 29201	57-6000286		16,018.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
WISCONSIN PUBLIC TV 821 UNIVERSITY AVENUE MADISON, WI 53706	39-1805963		14,979.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT

**2** Enter total number of Section 501(c)(3) and government organizations .....

**3** Enter total number of other organizations .....

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**

**▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization **GREATER WASHINGTON EDUCATIONAL  
TELECOMMUNICATIONS ASSOCIATION, INC.**

**Employer identification number**  
53-0242992

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IOWA PUBLIC TELEVISION 6450 CORPORATE DR, P.O.BOX 6450 JOHNSTON, IA 50131-6450	42-1008566		7,840.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT
VEGAS PBS 3050 E. FLAMINGO LAS VEGAS, NV 89121	88-6000030		20,000.	0.			STATION OUTREACH GRT-STATION-BASED ELEC PROG INIT

**2** Enter total number of Section 501(c)(3) and government organizations ..... **3**  
**3** Enter total number of other organizations ..... **3**

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2008**

**▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Name of the organization** GREATER WASHINGTON EDUCATIONAL  
TELECOMMUNICATIONS ASSOCIATION, INC.

**Employer identification number**  
53-0242992

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If line 1a is 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 .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? .....

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes," to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>	X	
<b>4c</b>		X
<b>5a</b>	X	
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X

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

Schedule J (Form 990) 2008

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
SHARON PERCY ROCKEFELLER	(i)	371,728.	29,200.	0.	15,500.	30,738.	447,166.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JOSEPH B. BRUNS	(i)	292,303.	23,200.	0.	15,500.	31,031.	362,034.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
DALTON DELAN	(i)	234,319.	24,000.	0.	15,500.	38,043.	311,862.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
POLLY POVEJSIL HEATH	(i)	243,111.	19,200.	0.	15,500.	24,666.	302,477.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
ADAM GRONSKI	(i)	100,851.	93,665.	0.	0.	21,323.	215,839.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
MARY CATHERINE PHELPS	(i)	154,325.	15,500.	0.	0.	14,775.	184,600.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
LISA DELANEY	(i)	160,389.	15,835.	0.	0.	23,431.	199,655.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
KEVIN HARRIS	(i)	159,718.	16,200.	0.	0.	26,703.	202,621.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
STEPHEN WILEY	(i)	52,915.	120,282.	0.	0.	11,958.	185,155.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
CHRISTOPHER GUARINO	(i)	149,024.	20,000.	0.	0.	13,947.	182,971.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
NOEL GUNTHER	(i)	154,434.	12,800.	0.	0.	23,954.	191,188.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

PART I, LINE 4B: PART I, LINE 4B. 457(B):

SHARON PERCY ROCKEFELLER - \$15,500

JOSEPH B. BRUNS - \$15,500

DALTON DELAN - \$15,500

POLLY POVEJSIL HEATH - \$15,500

457(B) DEFERRED COMPENSATION PLAN INTENDED TO BE A DEFERRED COMPENSATION

PLAN FOR CORPORATE OFFICERS OF WETA IN ACCORDANCE WITH SECTION 457(B) OF

THE IRC.

PART I, LINE 5: UNDERWRITING MANAGEMENT EARNS COMMISSIONS BASED ON

CORPORATE UNDERWRITING DOLLARS. THESE AMOUNTS ARE ACCRUED AND PAID EACH

MONTH.

**SCHEDULE J-2**  
**(Form 990)**

**Continuation Sheet for Form 990**

OMB No. 1545-0047

**2008**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization  
**GREATER WASHINGTON EDUCATIONAL  
TELECOMMUNICATIONS ASSOCIATION, INC.**

Employer Identification number  
**53-0242992**

**Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JONATHAN SILVER TRUSTEE	1.00	X						0.	0.	0.
LOREN ALLAN SMITH TRUSTEE, EX-OFFICIO	1.00	X						0.	0.	0.
JOHN ULFELDER TRUSTEE	1.00	X						0.	0.	0.
CYNTHIA STEELE VANCE TRUSTEE	1.00	X						0.	0.	0.
ANNE WEXLER VC, TRUSTEE	1.00	X		X				0.	0.	0.
SHELIA CRAIG WHITEMAN TRUSTEE	1.00	X						0.	0.	0.
CHRISTOPHER WOLF TRUSTEE	1.00	X						0.	0.	0.
SHARON PERCY ROCKEFELLER PRESIDENT AND CEO	40.00			X				400,928.	0.	46,238.
JOSEPH B. BRUNS EXEC VP & COO	40.00			X				315,503.	0.	46,531.
DALTON DELAN EXEC VP & CPO	40.00			X				258,319.	0.	53,543.
POLLY POVEJSIL HEATH SR VP, TREAS & CFO	40.00			X				262,311.	0.	40,166.
ADAM GRONSKI VP, CORP MARKETING	40.00				X			194,516.	0.	21,323.
MARY CATHERINE PHELPS SR VP DEVELOPMENT	40.00				X			169,825.	0.	14,775.
LISA DELANEY VP AND GEN COUNSEL	40.00					X		176,224.	0.	23,431.
KEVIN HARRIS VP AND MANAGER, TV	40.00					X		175,918.	0.	26,703.
STEPHEN WILEY SALES DIRECTOR	40.00					X		173,197.	0.	11,958.
CHRISTOPHER GUARINO SR STAFF PRODUCER	40.00					X		169,024.	0.	13,947.
NOEL GUNTHER VP, LEARNING MEDIA	40.00					X		167,234.	0.	23,954.

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

Schedule J-2 (Form 990) 2008

**SCHEDULE L**  
**(Form 990 or 990-EZ)**

**Transactions with Interested Persons**

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.  
▶ To be completed by organizations that answered  
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, lines 38a or 40b.

**2008**

Open To Public  
Inspection

**Name of the organization** GREATER WASHINGTON EDUCATIONAL  
TELECOMMUNICATIONS ASSOCIATION, INC. **Employer identification number**  
53-0242992

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ..... ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
<b>Total</b> .....				▶ \$						

**Part III Grants or Assistance Benefiting Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

**Part IV Business Transactions Involving Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
ANN FRIEDMAN	BUSINESS	0.	ANN FRIEDMA		X
FREDERICK J. RYAN, JR.	BUSINESS	249,265.	FREDERICK R		X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule L (Form 990 or 990-EZ) 2008

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

**2008**

Open to Public Inspection

Name of the organization GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.	Employer identification number 53-0242992
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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICE EXPENSES INCLUDE FUNCTIONAL EXPENSES FROM ALL

PROMOTION, EDUCATION, AND OUTREACH ACTIVITIES.

EXPENSES \$ 6961509. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 10: PROCESS FOR REVIEWING FORM 990:

AFTER BUDGET MANAGER COMPLETES RETURN, CONTROLLER REVIEWS AND THEN PASSES

ON TO CFO TO REVIEW. ANY QUESTIONS ARE THEN RAISED AND NECESSARY

CORRECTIONS ARE MADE BEFORE SENDING DRAFT TO CPA.

FORM 990, PART VI, SECTION B, LINE 12C: PROCESS FOR MONITORING AND

ENFORCING COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY:

THE CONFLICT OF INTEREST POLICY IS PART OF WETA'S OVERALL CODE OF CONDUCT

POLICY. ALL NEW EMPLOYEES ARE GIVEN THIS INFORMATION UPON HIRE. IN

ADDITION, WETA PERIODICALLY RE-COMMUNICATES THE POLICY ORGANIZATION-WIDE

AND KEEPS IT POSTED ON THE INTRANET.

FORM 990, PART VI, SECTION B, LINE 15: THE PROCESS FOR DETERMINING

COMPENSATION OF THE ORGANIZATION'S CEO, OR TOP MANAGEMENT OFFICIAL:

COMPENSATION FOR WETA'S OFFICERS IS REVIEWED AND APPROVED ANNUALLY BY

WETA'S COMPENSATION COMMITTEE AND BOARD OF TRUSTEES WITH AN EXTERNAL

CONSULTANT BASED UPON COMPARABLE MARKET INFORMATION. THIS ANNUAL

COMPENSATION REVIEW IS DOCUMENTED.

THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATION'S OFFICERS OR

KEY EMPLOYEES: COMPENSATION FOR WETA'S KEY EMPLOYEES IS REVIEWED BY WETA

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

Schedule O (Form 990) 2008

832211  
12-18-08

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

**2008**

Open to Public Inspection

Name of the organization	GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.	Employer identification number	53-0242992
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OFFICERS USING EXTERNAL MARKET INFORMATION. COMPENSATION REVIEWS ARE DOCUMENTED.

FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS AND

CONFLICT OF INTEREST POLICY ARE AVAILABLE ON THE INTERNAL WEBSITE. THE FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 2

OVERSIGHT OF AUDIT

THERE WAS NO CHANGE IN THE PROCESS FOR OVERSEEING THE AUDIT FROM THE PRIOR YEAR.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: ANN FRIEDMAN

(D) DESCRIPTION OF TRANSACTION: ANN FRIEDMAN, WETA BOARD OF DIRECTORS,

IS ALSO ON THE BOARD OF DIRECTORS AT NATIONAL SYMPHONY ORCHESTRA, WHICH

IS AN OCCASIONAL PARTNER IN WETA RADIO BROADCASTS OF NSO CONCERTS ON

CLASSICAL 90.9 FM.

(A) NAME OF PERSON: FREDERICK J. RYAN, JR.

(D) DESCRIPTION OF TRANSACTION: FREDERICK RYAN, JR., WETA BOARD OF

DIRECTORS, IS THE COO OF ALLBITTRON COMMUNICATIONS. WETA LEASES SPACE

FOR ITS TV TRANSMITTER ON A TOWER OWNED BY ALLBITTRON. THE LEASE

PRE-DATES MR. RYAN'S ELECTION TO THE BOARD AND THE RENT IS CONSIDERED TO

BE AT MARKET RATES.

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

Schedule O (Form 990) 2008

832211  
12-18-08

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

**2008**

Open to Public Inspection

Name of the organization	GREATER WASHINGTON EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.	Employer identification number 53-0242992
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FORM 990, ITEM B

REASON FOR AMENDED RETURN

FORM 990 IS BEING AMENDED TO CORRECT FORM 990, PART VI, LINE 10.





**Part V Transactions With Related Organizations**

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV.

**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?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest <b>(ii)</b> annuities <b>(iii)</b> royalties <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to other organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from other organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for other organization(s) .....		X
<b>e</b> Loans or loan guarantees by other organization(s) .....		X
<b>f</b> Sale of assets to other organization(s) .....		X
<b>g</b> Purchase of assets from other organization(s) .....		X
<b>h</b> Exchange of assets .....		X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s) .....		X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s) .....		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets .....		X
<b>n</b> Sharing of paid employees .....		X
<b>o</b> Reimbursement paid to other organization for expenses .....		X
<b>p</b> Reimbursement paid by other organization for expenses .....		X
<b>q</b> Other transfer of cash or property to other organization(s) .....		X
<b>r</b> Other transfer of cash or property from other organization(s) .....		X

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

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

