



SOUND CITIES ASSOCIATION

38 Cities. A Million People. One Voice.

SCA Finance Committee

October 29, 2024

11:30 AM

Virtual

From computer, tablet, or smartphone:

<https://us02web.zoom.us/j/85824599790?pwd=L0hGY1lCcXBzUWpHVjM1Rk5SYW1YUT09>

To dial in: 822 5179 3957 Meeting ID: 858 2459 9790 Password: 366584

- 1) Call to Order Armondo Pavone, Treasurer
- 2) Public Comment
- 3) Approval of Minutes of the September 24, 2024 meeting [Attachment 1](#)
Recommended Action: *Approval of minutes of the September 24, 2024 SCA Finance Committee Meeting*
- 4) Review and approval of the September 2024 Financial Reports [Attachments 2-4](#)
Recommended Action: *Recommendation to the SCA board for approval of the September 2024 Financial Reports, consisting of the September 2024 Balance Sheet and September 2024 Profit & Loss Report*
- 5) Update on Sponsors/RAMS/Partners [Attachments 5](#)
- 6) DRAFT 2025 SCA Budget [Attachments 6-7](#)
Recommended Action: *Recommendation to the SCA Board of Directors draft 2025 SCA Budget as shown in Attachment 7*
- 7) 2023 Form 990 [Attachments 8](#)
Recommended Action: *Approval of the draft 2023 Form 990 as shown in Attachment 8*
- 8) Other Updates
- 9) For the good of the order
- 10) Adjourn



DRAFT SCA Finance Committee Minutes

September 24, 2024

11:30 AM

Virtual

1. SCA Treasurer Armondo Pavone called the meeting to order at 11:38 AM. Present were members Dana Ralph, Mary Lou Pauly, and Amy Falcone, and SCA staff Leah Willoughby. Absent was member Regan Bolli.
2. Treasurer Pavone inquired whether anyone from the public wished to give comment. Hearing none, this portion of the agenda was closed.
3. Pavone asked for any questions or concerns regarding the draft minutes of the August 27, 2024 SCA Finance Committee Meeting.

Pauly moved, seconded by Ralph, to approve the minutes of the August 27, 2024 Finance Committee Meeting. There was no discussion. The motion passed unanimously.

4. Treasurer Pavone summarized and asked for any questions or comments regarding the financial reports of August 2024.

Bolli moved, seconded by Falcone, to recommend to the SCA Board of Directors approval of the August 2024 Financial Reports, consisting of the August 2024 Balance Sheet and August 2024 Profit & Loss Report. The motion passed unanimously.

5. Chief Operating Officer Leah Willoughby noted sponsor invoices paid since the last meeting of the board, invoices sent since the last meeting of the committee, and sponsorship payments expected.
6. 2025 SCA Budget Discussion will be brought back to the next meeting of the committee.
7. There were no other updates.
8. There were no items for the good of the order.
9. Treasurer Pavone adjourned the meeting at 11:46 AM.

SOUND CITIES ASSOCIATION | BALANCE SHEET

As of September 30, 2024

1110 HomeStreet Bank	19,816.90
1120 HomeStreet Bank - Money Market	884,645.97
1130 PayPal Bank	365.84
Total Bank Accounts	\$ 904,828.71
1200 Accounts Receivable	2,000.00
Total Accounts Receivable	\$ 2,000.00
1140 Investments - Time Value	329,181.32
1145 Accrued Interest Receivable	-693.18
1499 Undeposited Funds	0.00
1550 Prepaid Expenses	0.00
Other Current Asset	0.00
Total Other Current Assets	\$ 328,488.14
Total Current Assets	\$ 1,235,316.85
1410 Furniture and Fixtures	31,060.23
1415 Computers	0.00
1420 Accumulated Depreciation	-31,060.23
Total 1400 Fixed Assets	\$ 0.00
Other Long-term Assets	0.00
Total Other Assets	\$ 0.00
TOTAL ASSETS	\$ 1,235,316.85
Total Accounts Payable	\$ 762.69
2200 HomeStreet Credit Card	1,416.17
Total Credit Cards	\$ 1,416.17
2300 Accrued Payroll	13,365.02
2110 Federal Withholding	0.00
2111 Direct Deposit Liabilities	0.00
Total 2140 Medicare	\$ 0.00
2150 SDI	0.00
2405 FUTA	396.25
2410 SUI	370.71
Total 2415 FIT, SS, Medicare - 941	\$ 5,695.57
2420 L&I	357.30
2425 WA Paid Family & Medical Leave	583.27
2426 WA Cares	937.81
2435 PERS Payable	3,649.15
2440 DCAP / FSA Payable	0.00
2445 DRS DCP Payable	0.00
2450 Medical/Dental/Vision/Life Ins	506.65
2460 Accrued Vacation Pay	15,004.74
2470 w/held Supplemental Life	0.00
2499 Payroll Corrections	173.01
Car Allowance Payable	0.00
Total 2400 Payroll Liabilities	\$ 27,361.80
Accrued Liabilities	0.00
Deferred Revenue	0.00
Total Other Current Liabilities	\$ 40,726.82
Total Current Liabilities	\$ 42,905.68
Total Liabilities	\$ 42,905.68
3110 Equipment Purchase Reserve	15,000.00
3120 Operations Reserves	525,598.00
3130 Contractual Obligations Reserve	51,179.00
3140 Legal Reserves Fund	25,000.00
Total 3100 Board Designated Reserves	\$ 616,777.00
3200 Board Designated Contra	-616,777.00
3300 Fund Balance (Prior Years)	724,058.31
3999 Opening Bal Equity	0.00
Net Income	468,352.86
Total Equity	\$ 1,192,411.17
TOTAL LIABILITIES AND EQUITY	\$ 1,235,316.85

SOUND CITIES ASSOCIATION | Profit and Loss by Month

January - September, 2024

	Jan 2024	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Total	2024 Budget	Difference	% Budget Remaining	
1010 Member Dues	915,709.33									915,709.33	915,709.00	0.00	0%	
1020 Membership/Sponsorships	18,500.00	46,000.62	1,500.00	14,500.00	2,500.00	8,500.00				91,500.62	96,500.00	-4,999.38	5%	
1030 Registration/Dinners Revenue	65.00	3,117.99	837.06		1,015.00	2,325.00	1,540.00		2,180.00	11,080.05	24,500.00	-13,419.95	55%	
1040 Interest Income	1,716.20	1,250.32	-625.33	1,854.21	1,412.94	890.13	1,956.81	1,016.40	1,926.70	11,398.38	13,720.00	-2,321.62	17%	
1150 CC Points Redeemed for Credit		150.00			50.00				175.00	375.00	900.00	-525.00	58%	
Total Income	\$ 935,990.53	\$ 50,518.93	\$ 1,711.73	\$ 16,354.21	\$ 4,977.94	\$ 11,715.13	\$ 3,496.81	\$ 1,016.40	\$ 4,281.70	\$ 1,030,063.38	\$1,051,329.00	(\$21,265.95)	2%	
Gross Profit	\$ 935,990.53	\$ 50,518.93	\$ 1,711.73	\$ 16,354.21	\$ 4,977.94	\$ 11,715.13	\$ 3,496.81	\$ 1,016.40	\$ 4,281.70	\$ 1,030,063.38				
											2024 Budget	Difference	% Budget Remaining	
Total 5100 Salaries	\$ 46,416.48	\$ 46,547.96	\$ 47,103.19	\$ 40,662.69	\$ 33,829.62	\$ 43,985.36	\$ 39,470.37	\$ 42,177.45	\$ 42,366.83	\$ 382,559.95	659,500.00	276,940.05	42%	Total 5100 Salaries
5210 Taxes-FUTA	55.49	14.95	18.29	7.77	0.40	0.00	21.50	20.50	0.00	138.90	336.00	197.10	59%	5210 Taxes-FUTA
5220 Taxes-SUTA	300.13	315.21	308.18	376.34	179.99	123.31	89.91	108.85	110.12	1,912.04	2,872.00	959.96	33%	5220 Taxes-SUTA
5230 Taxes - FICA, Medicare - 941	3,589.10	3,599.18	3,641.63	5,340.86	3,372.08	2,657.28	3,057.72	3,264.80	3,279.30	31,801.95	47,750.00	15,948.05	33%	5230 Taxes - FICA, Medicare - 941
5240 Taxes - L & I	92.46	94.45	108.68	62.23	69.22	72.46	73.13	72.45	72.07	717.15	2,410.00	1,692.85	70%	5240 Taxes - L & I
5250 Taxes-FMLA	-52.21	248.86	251.80	369.31	233.16	183.74	211.43	225.77	226.76	1,898.62	2,610.00	711.38	27%	5250 Taxes-FMLA
Total 5200 Payroll Taxes	\$ 3,984.97	\$ 4,272.65	\$ 4,328.58	\$ 6,156.51	\$ 3,854.85	\$ 3,036.79	\$ 3,453.69	\$ 3,692.37	\$ 3,688.25	\$ 36,468.66	55,978.00	19,509.34	35%	Total 5200 Payroll Taxes
5310 Pension Plan Contributions	4,310.87	4,334.66	4,388.93	3,765.18	2,108.80	3,050.18	3,332.43	3,601.30	3,617.27	32,509.62	58,300.00	25,790.38	44%	5310 Pension Plan Contributions
5320 Medical/Dental/Vision/Life Ins	5,785.32	5,785.32	6,286.80	6,220.86	4,651.40	4,651.40	4,651.40	6,153.20	5,652.60	49,838.30	80,760.00	30,921.70	38%	5320 Medical/Dental/Vision/Life Ins
5330 Professional Development	23.54									23.54	8,000.00	7,976.46	100%	5330 Professional Development
5345 ED Car Allowance	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	4,500.00				5345 ED Car Allowance
5346 Staff Travel Expenses	51.44	45.34	53.56				48.70		20.00	219.04				5346 Staff Travel Expenses
Total 5340 Travel Reimbursement	\$ 551.44	\$ 545.34	\$ 553.56	\$ 500.00	\$ 500.00	\$ 500.00	\$ 548.70	\$ 500.00	\$ 520.00	\$ 4,719.04	13,000.00	8,280.96	64%	Total 5340 Travel Reimburse
Total 5300 Staff Benefits	\$ 10,671.17	\$ 10,665.32	\$ 11,229.29	\$ 10,486.04	\$ 7,260.20	\$ 8,201.58	\$ 8,532.53	\$ 10,254.50	\$ 9,789.87	\$ 87,090.50	160,060.00	72,969.50	46%	Total 5300 Staff Benefits
Total 5000 Staff	\$ 61,072.62	\$ 61,485.93	\$ 62,661.06	\$ 57,305.24	\$ 44,944.67	\$ 55,223.73	\$ 51,456.59	\$ 56,124.32	\$ 55,844.95	\$ 506,119.11	875,538.00	369,418.89	42%	Total 5000 Staff
6100 Rent	2,608.17	2,608.17	2,609.13	2,608.49	2,608.49	2,608.49	2,608.49	2,608.49	2,608.49	23,476.41	32,740.00	9,263.59	28%	6100 Rent
6200 Office Insurance						380.00				380.00	604.00	224.00	37%	6200 Office Insurance
6310 Copier/Printer Lease & Maint		495.14	238.96	475.39	262.86		523.12	288.97	248.69	2,533.13	3,190.00	656.87	21%	6310 Copier/Printer Lease & Maint
6320 Outside Printing & Publication				371.92			371.92	306.15		1,049.99	900	-149.99	-17%	6320 Outsourced Printing/Publications
Total 6300 Printing and Publication	\$ 0.00	\$ 495.14	\$ 238.96	\$ 847.31	\$ 262.86	\$ 0.00	\$ 895.04	\$ 595.12	\$ 248.69	\$ 3,583.12	4,090.00	506.88	12%	Total 6300 Printing and Publication
6420 Website Design/Hosting		33.01		47.37	203.88					284.26	4,200.00	3,915.74	93%	6420 Website Design/Hosting
6430 IT Equipment	51.58						4,579.36			4,630.94	6,000.00	1,369.06	23%	6430 Equipment
6440 Software/Subscriptions	1,357.95	565.76	265.32	301.89	295.28	2,017.97	301.89	317.32	581.67	6,005.05	7,500.00	1,494.95	20%	6440 Software/Subscriptions
Total 6400 IT	\$ 1,409.53	\$ 598.77	\$ 265.32	\$ 349.26	\$ 499.16	\$ 2,017.97	\$ 4,881.25	\$ 317.32	\$ 581.67	\$ 10,920.25	17,700.00	6,779.75	38%	Total 6400 IT
6500 Cell Phone Service	308.82	308.94	307.92	307.92	384.97	338.04	250.53	251.70	267.58	2,726.42	3,800.00	1,073.58	28%	6500 Cell Phone Service
6600 CC, Banking & Other Fees	5.00	5.00	21.00	5.00	5.00	5.00	65.64	5.00	5.00	121.64	350	228.36	65%	6600 CC, Banking & Other Fees
6700 Accounting Fees											4,700.00	4,700.00	100%	6700 Accounting Fees
6800 Legal Fees											5,000.00	5,000.00	100%	6800 Legal
6900 Office Supplies / Misc.	48.47	27.72	70.04	78.64	117.71	118.61	27.72	75.13	125.83	689.87	3,000.00	2,310.13	77%	6900 Office Supplies / Misc.
Total 6000 Office / Overhead	\$ 4,379.99	\$ 4,043.74	\$ 3,512.37	\$ 4,196.62	\$ 3,878.19	\$ 5,468.11	\$ 8,728.67	\$ 3,852.76	\$ 3,837.26	\$ 41,897.71	71,984.00	30,086.29	42%	Total 6000 Office / Overhead
7100 Food/Beverage/Rentals		60.76	3,788.98			3,232.84	4,659.87	0.00		11,742.45	35,000.00	23,257.55	66%	7100 Food/Beverage/Rentals
7200 Event Pmts Processing Fee		123.11	31.65		38.49	85.34	64.92		80.64	424.15	1,500.00	1,075.85	72%	7200 Event Pmts Processing Fee
Total 7000 Event Expenses	\$ 0.00	\$ 183.87	\$ 3,820.63	\$ 0.00	\$ 38.49	\$ 3,318.18	\$ 4,724.79	\$ 0.00	\$ 80.64	\$ 12,166.60	36,500.00	24,333.40	67%	Total 7000 Event Expenses
8100 Insurance (D&O)				1,860.00						1,860.00	2,174.00	314.00	14%	8100 D&O Insurance
8200 Awards / Recognition	0.00			67.26			19.95	332.03	403.80	823.04	5,000.00	4,176.96	84%	8200 Awards / Recognition
8300 Retreats/Mtgs/Conf/Dues/Events	1,104.15	611.83	705.97	229.31	140.33	87.99	568.45	481.70	510.96	4,440.69	15,000.00	10,559.31	70%	8300 Retreats/Mtgs/Conf/Dues/Events
8400 Consultants/Special Projects						50.00	358.00			408.00	20,000.00	19,592.00	98%	8400 Consultants/Special Projects
Total 8000 Board / Org Development	\$ 1,104.15	\$ 611.83	\$ 705.97	\$ 2,156.57	\$ 140.33	\$ 137.99	\$ 946.40	\$ 813.73	\$ 914.76	\$ 7,531.73	42,174.00	34,642.27	82%	Total 8000 Board / Org Development
9000 Contingency Fund	199.00				199.00				299.00	697.00	25,000.00	24,303.00	97%	Contingency Fund
Reconciliation Discrepancies				-33.01	3.00					-30.01				
Total Expenses	\$ 66,755.76	\$ 66,325.37	\$ 70,700.03	\$ 63,625.42	\$ 49,203.68	\$ 64,148.01	\$ 65,856.45	\$ 60,790.81	\$ 60,976.61	\$ 568,382.14	1,051,196.00	482,783.85	46%	Total Expenses
Net Operating Income	\$ 869,234.77	-\$ 15,806.44	-\$ 68,988.30	-\$ 47,271.21	-\$ 44,225.74	-\$ 52,432.88	-\$ 62,359.64	-\$ 59,774.41	-\$ 56,694.91	\$ 461,681.24				
Other Income														
Investment returns	2,018.97	-637.58	-648.65	-190.67	-99.61	684.47	1,802.58	2,790.42	942.87	6,662.80				
Total Other Income	\$ 2,018.97	-\$ 637.58	-\$ 648.65	-\$ 190.67	-\$ 99.61	\$ 684.47	\$ 1,802.58	\$ 2,790.42	\$ 942.87	\$ 6,662.80				
Net Other Income	\$ 2,018.97	-\$ 637.58	-\$ 648.65	-\$ 190.67	-\$ 99.61	\$ 684.47	\$ 1,802.58	\$ 2,790.42	\$ 942.87	\$ 6,662.80				
Net Income	\$ 871,253.74	-\$ 16,444.02	-\$ 69,636.95	-\$ 47,461.88	-\$ 44,325.35	-\$ 51,748.41	-\$ 60,557.06	-\$ 56,983.99	-\$ 55,752.04	\$ 468,344.04				

SOUND CITIES ASSOCIATION

A/R Aging Summary

As of October 22, 2024

	CURRENT	1 - 30	31 - 60	61 - 90	91 AND OVER	TOTAL
Desimone Consulting Group					500.00	\$500.00
Gordon Thomas Honeywell	500.00					\$500.00
Green River College					500.00	\$500.00
Langton Spieth, LLC					500.00	\$500.00
TOTAL	\$500.00	\$0.00	\$0.00	\$0.00	\$1,500.00	\$2,000.00

2024 Sponsorship Payment

Tracking

Highlighted have been invoiced and payment is not yet received.

Sponsorship Level	Sponsor/Entity	Invoiced Month	Amount Invoiced	Paid Month	Amount Paid
Partner	Amazon	February 2024	\$ 6,000.00	September 2024	\$ 6,000.00
Regional Associate Member	AWC	February 2024	\$ 500.00	February 2024	\$ 500.00
Event Sponsorship	Boeing	November 2023	\$ 12,500.00	December 2023	\$ 12,500.00
Event Sponsorship	Boeing	June 2023	\$ 2,500.00	July 2024	\$ 2,500.00
Partner	Boeing	June 2023	\$ 6,000.00	July 2024	\$ 6,000.00
Partner	Comcast	April 2024	\$ 6,000.00	April 2024	\$ 6,000.00
Event Sponsorship	Comcast	April 2024	\$ 2,500.00	April 2024	\$ 2,500.00
Regional Associate Member	Desimone Consulting Group	March 2024	\$ 500.00		
Regional Associate Member	EMC Research	February 2024	\$ 500.00	March 2024	\$ 500.00
Regional Associate Member	Foster Garvey	March 2024	\$ 500.00	April 2024	\$ 500.00
Regional Associate Member	Green River College	February 2024	\$ 500.00		
Event Sponsorship	Gordon Thomas Honeywell	October 2024	\$ 500.00		
Regional Associate Member	Jurassic Parliament			In-Kind	
Regional Associate Member	KC Dept of Assessments	February 2024	\$ 500.00	October 2024	\$ 500.00
Regional Associate Member	King County Library Systems	February 2024	\$ 500.00	May 2024	\$500.00
Regional Associate Member	Langton Spieth, LLC	February 2024	\$ 500.00		
Partner	Lumen	March 2024	\$ 6,000.00	May 2024	\$ 6,000.00
Partner	Marketing Solutions			In-Kind	
Partner	Microsoft	February 2024	\$ 6,000.00	February 2024	\$ 6,000.00
Partner	Port of Seattle	February 2024	\$ 6,000.00	February 2024	\$ 6,000.00
Regional Associate Member	PRR	March 2024	\$ 500.00	April 2024	\$ 500.00
Partner	Puget Sound Energy	February 2024	\$ 6,000.00	April 2024	\$ 6,000.00
Event Sponsorship	Puget Sound Energy	May 2024	\$ 2,500.00	May 2024	\$ 2,500.00
Partner	Republic Services	February 2024	\$ 6,000.00	April 2024	\$ 6,000.00
Regional Associate Member	Seattle Building and Constr.	February 2024	\$ 500.00	February 2024	\$ 500.00
Partner	Sound Transit	February 2024	\$ 6,000.00	February 2024	\$ 6,000.00
Regional Associate Member	ValleyCom	February 2024	\$ 500.00	March 2024	\$ 500.00
Partner	Waste Management	February 2024	\$ 6,000.00	March 2025	\$ 6,000.00
Totals			\$ 86,000.00		\$ 84,000.00

Not Yet Invoiced for 2024

Not Yet Invoiced for 2024

Sponsorship Level	Sponsor	Amount	Invoice Due Month
RAM	King County Elections	\$500.00	Jun-24
Partner	Seattle King County Realtors	\$6,000.00	Sep-24
Partner	Seattle Metro Chamber	\$6,000.00	Sep-24
Partner	Recology	\$6,000.00	Sep-24
RAM	McDonald's	\$500.00	Nov-24
		\$19,000.00	

DRAFT 2025 BUDGET

				2024 Adopted Budget
City Member Dues			\$955,060.73	\$915,709.00
Membership/Sponsorships			\$96,500.00	\$96,500.00
Registration/Dinners Revenue			\$18,500.00	\$24,500.00
Interest Income			\$12,880.00	\$13,720.00
CC Points			\$650.00	\$900.00
TOTAL INCOME			\$1,083,590.73	\$1,051,329.00
Salaries			\$641,941.00	\$659,500.00
Payroll Taxes			\$54,868.00	\$55,978.00
	FUTA	\$336.00		\$336.00
	SUTA	\$2,824.00		\$2,872.00
	FICA/Medicare	\$46,551.00		\$47,750.00
	L&I	\$2,691.00		\$2,410.00
	WA PFML	\$2,466.00		\$2,610.00
Benefits			\$184,991.00	\$160,060.00
	PERS Contributions	\$58,481.00		\$58,300.00
	Med/Dental/Vision/Life	\$105,510.00		\$80,760.00
	Prof. Development	\$8,000.00		\$8,000.00
	Travel Reimb./Car Allowance	\$13,000.00		\$13,000.00
Total Staff			\$881,800.00	\$875,538.00
Rent			\$34,163.00	\$32,740.00
Office Insurance			\$620.00	\$604.00
Printing/Reproduction			\$6,450.00	\$4,090.00
	Copier/Printer Lease & Maint.	\$3,450.00		\$3,190.00
	Outsourced Printing/Publications	\$3,000.00		\$900.00
IT Expenses			\$18,400.00	\$17,700.00
	Website Design/Hosting	\$3,500.00		\$4,200.00
	IT Equipment	\$6,000.00		\$6,000.00
	Software/Subscriptions	\$8,900.00		\$7,500.00
Cell Phone Service			\$4,300.00	\$3,800.00
CC, Bank, Other Fees			\$500.00	\$350.00
Accounting			\$19,000.00	\$4,700.00
Legal			\$5,000.00	\$5,000.00
General Office Supplies			\$3,000.00	\$3,000.00
Total Office/Overhead			\$91,433.00	\$71,984.00
Event Food/Bev/Rentals			\$40,000.00	\$35,000.00
Event Processing Fees			\$1,850.00	\$1,500.00
Total Event Expenses			\$41,850.00	\$36,500.00
Liability Insurance			\$2,500.00	\$2,174.00
	D&O Insurance	\$1,900.00		\$1,774.00
	Cyber Security Insurance	\$600.00		\$400.00
Awards/Recognition			\$6,000.00	\$5,000.00
Retreats/Meetings/Events/Conferences/Dues			\$15,000.00	\$15,000.00
Consultants/Special Projects			\$20,000.00	\$20,000.00
Total Board/Org. Development			\$43,500.00	\$42,174.00
Contingency Fund	Contingency Fund		\$25,000.00	\$25,000.00
TOTAL EXPENSES			\$1,083,583.00	\$1,051,196.00
			Income minus Expenses	\$7.73



SOUND CITIES ASSOCIATION DRAFT 2025 Budget

Member City Dues	\$	955,061
Membership/Sponsorships	\$	96,500
Registration/Dinners Revenue	\$	18,500
Interest Income	\$	12,880
Credit Cards Points Redeemed for Credit	\$	650
Total Income	\$	1,083,591
Salaries	\$	641,941
Payroll Taxes	\$	54,868
FUTA	\$	336
SUTA	\$	2,824
FICA/Medicare	\$	46,551
L & I	\$	2,691
WA PFMLA	\$	2,466
Staff Benefits	\$	184,991
Pension Plan Contributions	\$	58,481
Medical/Dental/Vision/Life Ins	\$	105,510
Professional Development	\$	8,000
Travel Reimburse	\$	13,000
TOTAL STAFF	\$	881,800
Rent	\$	34,163
Office Insurance	\$	620
Printing and Publication	\$	6,450
Copier/Printer Lease & Maint	\$	3,450
Outside Printing & Publication	\$	3,000
IT	\$	18,400
Website Design/Hosting	\$	3,500
IT Equipment	\$	6,000
Software/Subscriptions	\$	8,900
Cell Phone Service	\$	4,300
CC, Banking & Other Fees	\$	500
Accounting Fees	\$	19,000
Legal Fees	\$	5,000
Office Supplies / Misc.	\$	3,000
TOTAL OFFICE/OVERHEAD	\$	91,433
Event Food/Bev/Rentals	\$	40,000
Event Processing Fees	\$	1,850
TOTAL EVENT EXPENSES	\$	41,850
Liability Insurance	\$	2,500
D&O Insurance	\$	1,900
Cyber Security Insurance	\$	600
Awards / Recognition	\$	6,000
Retreats/Mtgs/Conf/Dues/Events	\$	15,000
Consultants/Special Projects	\$	20,000
TOTAL BOARD / ORG DEVELOPMENT	\$	43,500
CONTIGENCY FUND	\$	25,000
Total Expenses	\$	1,083,583

Income minus expensees	
\$	8

2023 Exempt Organization Business Tax Return
prepared for:

SOUND CITIES ASSOCIATION
6300 SOUTHCENTER BLVD, #206
TUKWILA, WA 98188

PAULSEN, MEGAARD & CO, PS
22232 17th Ave SE, Suite 310
Bothell, WA 98021

Return of Organization Exempt From Income Tax

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

2023

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning **2023**, and ending **2020**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization **SOUND CITIES ASSOCIATION**
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
6300 SOUTHCENTER BLVD 206
 City or town, state or province, country, and ZIP or foreign postal code
TUKWILA, WA 98188

D Employer identification number
91-1616272

E Telephone number
(206) 433-7168

G Gross receipts \$ **975,121.**

F Name and address of principal officer:
JAN MOLINARO, PRESIDENT, 6300 SOUTHCENTER BLVD #206, TUKWILA, WA 98188

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions.

I Tax-exempt status: 501(c)(3) 501(c) (**4**) (insert no.) 4947(a)(1) or 527

J Website: **www.soundcities.org**

H(c) Group exemption number

K Form of organization: Corporation Trust Association Other

L Year of formation: **1993**

M State of legal domicile: **WA**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>Leadership through advocacy, education, mutual support, and networking to member cities in King County as they act locally, partner regionally to create livable vital communities. Activities supporting the mission: appointment of elected to boards/committees, monitoring regional issues for city impact.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	13
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	7
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)		
	9	Program service revenue (Part VIII, line 2g)	877,299.	962,013.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,757.	13,108.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	883,056.	975,121.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	789,714.	821,032.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	132,288.	105,400.
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	922,002.	926,432.
19	Revenue less expenses. Subtract line 18 from line 12	-38,946.	48,689.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 1,601,769.	End of Year 1,729,853.
	21	Total liabilities (Part X, line 26)	929,795.	1,005,795.
	22	Net assets or fund balances. Subtract line 21 from line 20	671,974.	724,058.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: **CARL COLE, INTERIM EXECUTIVE DIRECTOR**
 Date: **10/04/2024**

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **Susan L. Paulsen, CPA**
 Preparer's signature: **Susan L. Paulsen, CPA**
 Date: **10/07/2024**
 Check if self-employed PTIN: **P00443486**

Firm's name: **PAULSEN, MEGAARD & CO, PS**
 Firm's EIN: **91-1537851**
 Firm's address: **22232 17th Ave SE, Suite 310, Bothell, WA 98021**
 Phone no.: **(425) 489-3416**

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Leadership through advocacy, education, mutual support,
and networking to member cities in King County as they act locally, partner regionally to create livable vital
communities. Activities supporting the mission: appointment of elected to boards/committees, monitoring regional issues for city impact.

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 841,158. including grants of \$ 0.) (Revenue \$ 962,013.)

- 1. SCA appoints members to various regional boards and committees - SCA Executive Director and Policy Analysts provide policy analysis to members serving on those regional boards and committees, and Chief Operating Officer and Administrative Assistant provides administrative support.
- 2. SCA brings together our 38 member cities to discuss regional policy at the Public Issues Committee (PIC) - Executive Director and Policy Analysts provide policy support, Chief Operating Officer provides administrative support.
- 3. SCA holds networking events and educational forums for our members.

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe on Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses 841,158.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational reporting requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	7
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17	

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 13		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed _____
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.
 CARL COLE, 6300 SOUTHCENTER BLVD, SUITE 206, TUKWILA, WA 98188 (206) 433-7168

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) David Hoffman Executive Director	40.00			X			196,251.	0.	50,017.	
(2) Brian Parry Policy Director	40.00					X	147,558.	0.	28,074.	
(3) Leah Willoughby Chief Operating Officer	40.00					X	117,989.	0.	23,438.	
(4) Jan Molinaro Board President and Mayor of Enumclaw	10.00	X					0.	0.	0.	
(5) Mary Lou Pauly Board Vice President and Mayor of Issaquah	10.00	X					0.	0.	0.	
(6) Carl Cole Board Treasurer and City Manager of SeaTac	4.00	X					0.	0.	0.	
(7) James McNeal Board Secretary and Councilmember for Bothell	4.00	X					0.	0.	0.	
(8) Angela Birney Board Immediate Past President and Mayor of Redmond	4.00	X					0.	0.	0.	
(9) Amy Falcone Board member and Councilmember for Kirkland	4.00	X					0.	0.	0.	
(10) Wendy Weiker Board member and Deputy Mayor of Mercer Island	4.00	X					0.	0.	0.	
(11) De'Sean Quinn Board member and Councilmember for Tukwila	4.00	X					0.	0.	0.	
(12) Jim Ferrell Board member and Mayor of Federal Way	4.00	X					0.	0.	0.	
(13) Traci Buxton Board member and Deputy Mayor of Des Moines	4.00	X					0.	0.	0.	
(14) Amy Ockerlander Board member and Mayor of Duvall	4.00	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(15) Armondo Pavone Board member and Mayor of Renton	4.00	<input checked="" type="checkbox"/>						0.	0.	0.
(16) Bill Boyce Board member and Council President for Kent	4.00	<input checked="" type="checkbox"/>						0.	0.	0.
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal								461,798.	0.	101,529.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								461,798.	0.	101,529.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3

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

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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns					
	b	Membership dues					
	c	Fundraising events					
	d	Related organizations					
	e	Government grants (contributions)					
	f	All other contributions, gifts, grants, and similar amounts not included above					
	g	Noncash contributions included in lines 1a-1f					
	1g	\$					
	h	Total. Add lines 1a-1f					
Program Service Revenue			Business Code				
	2a	MEMBERSHIP DUES	813910	837,671.	837,671.	0.	
	b	MEMBERSHIP AND SPONSORSHIP	813910	102,500.	102,500.	0.	
	c	EVENT REGISTRATIONS AND OTHER	900099	21,842.	21,842.	0.	
	d	-----					
	e	-----					
	f	All other program service revenue . .					
g	Total. Add lines 2a-2f		962,013.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		13,108.	0.	0.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross rents	(i) Real				
			(ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
	b	Less: direct expenses					
c	Net income or (loss) from fundraising events						
9a	Gross income from gaming activities. See Part IV, line 19						
b	Less: direct expenses						
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances						
b	Less: cost of goods sold						
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
	11a	-----					
	b	-----					
	c	-----					
	d	All other revenue					
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions		975,121.	962,013.	0.	13,108.	

Part IX Statement of Functional Expenses

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

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

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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	246,268.	226,567.	19,701.	0.
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	433,122.	398,472.	34,650.	0.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	35,935.	33,060.	2,875.	0.
9 Other employee benefits	51,910.	47,757.	4,153.	0.
10 Payroll taxes	53,797.	49,493.	4,304.	0.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	15,263.	0.	15,263.	0.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	1,486.	1,367.	119.	0.
12 Advertising and promotion				
13 Office expenses	10,891.	10,020.	871.	0.
14 Information technology	7,210.	6,633.	577.	0.
15 Royalties				
16 Occupancy	32,401.	29,809.	2,592.	0.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	36,031.	36,031.	0.	0.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	2,118.	1,949.	169.	0.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a -----				
b -----				
c -----				
d -----				
e All other expenses -----				
25 Total functional expenses. Add lines 1 through 24e	926,432.	841,158.	85,274.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	60,428.	1	44,071.
	2 Savings and temporary cash investments	393,095.	2	442,171.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	849,171.	4	930,709.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 44,816.		
	b Less: accumulated depreciation	10b 44,816.	10c 0.	0.
	11 Investments—publicly traded securities	294,522.	11	309,653.
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	4,553.	15	3,249.
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,601,769.	16	1,729,853.	
Liabilities	17 Accounts payable and accrued expenses	86,124.	17	77,586.
	18 Grants payable		18	
	19 Deferred revenue	843,671.	19	928,209.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	929,795.	26	1,005,795.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	671,974.	27	724,058.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	671,974.	32	724,058.
33 Total liabilities and net assets/fund balances	1,601,769.	33	1,729,853.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	975,121.
2	Total expenses (must equal Part IX, column (A), line 25)	2	926,432.
3	Revenue less expenses. Subtract line 2 from line 1	3	48,689.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	671,974.
5	Net unrealized gains (losses) on investments	5	3,395.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	724,058.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		



**SCHEDULE C
(Form 990)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

**Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.**

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

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

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

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

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

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

Name of organization SOUND CITIES ASSOCIATION	Employer identification number 91-1616272
---	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions \$
- 3 Volunteer hours for political campaign activities. See instructions

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 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 Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 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 exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were 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-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990) 2023

BAA

REV 05/09/24 PRO

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	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="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">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.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	<input checked="" type="checkbox"/>	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<input checked="" type="checkbox"/>	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		<input checked="" type="checkbox"/>

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 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 expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Part IV Supplemental Information *(continued)*

DO NOT MAIL

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: SOUND CITIES ASSOCIATION; Employer identification number: 91-1616272

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

Part II Conservation Easements

Table with 2 columns: Held at the End of the Tax Year. Rows 1-9 for various questions and amounts.

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

Table with 2 columns: Revenue and Assets. Rows 1a-2 for various amounts.

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make 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 program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

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 Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on 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 XIII and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment _____ %
- b** Permanent endowment _____ %
- c** Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations? Yes No
- (ii)** Related organizations? Yes No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Yes No

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0.			0.
b Buildings				
c Leasehold improvements		13,756.	13,756.	0.
d Equipment		31,060.	31,060.	0.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				0.

Part VII Investments—Other Securities

Complete if the organization answered “Yes” on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B)) . . .		

Part VIII Investments—Program Related

Complete if the organization answered “Yes” on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) . . .		

Part IX Other Assets

Complete if the organization answered “Yes” on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered “Yes” on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	

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

Part XIII Supplemental Information *(continued)*

DO NOT MAIL

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SOUND CITIES ASSOCIATION

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

91-1616272

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <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 (such as maid, chauffeur, chef) </p>		
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?</p>	2	
<p>3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Written employment contract <input type="checkbox"/> Independent compensation consultant <input 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 </p>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in or receive payment from a supplemental nonqualified retirement plan?</p> <p>c Participate in or receive payment from an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	4b
		4c
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" on line 5a or 5b, describe in Part III.</p>	5a	5b
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" on line 6a or 6b, describe in Part III.</p>	6a	6b
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III</p>	7	
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9	

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 David Hoffman Executive Director	190,001. 0.	0. 0.	6,250. 0.	19,673. 0.	30,344. 0.	246,268. 0.	0. 0.
2 Brian Parry Policy Director	130,953. 0.	16,605. 0.	0. 0.	14,653. 0.	13,421. 0.	175,632. 0.	0. 0.
3							
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16							

Part III Supplemental Information

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

Area with horizontal dashed lines for supplemental information.

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SOUND CITIES ASSOCIATION

Employer identification number

91-1616272

Pt VI, Line 6: SCA is a membership organization. Membership is largely composed of cities in King County, with businesses and other organizations contributing as Regional Associate Members.

Pt VI, Line 7a: Per Article 4 of the Bylaws, the Board shall be composed of thirteen directors, consisting of ten district representative directors, one chair of the Public Issues Committee, the Immediate Past President, and one member representative from a member city appointed by the King County City Managers and Administrators Group. Elected officials from member cities elect the ten district representative directors for their respective caucus groups. The ten district representative directors shall be distributed as four from the North Caucus, four from the South Caucus, one from the South Valley Caucus, and one from the Snoqualmie Valley Caucus. The Public Issues Committee elects its chair. The city managers elect a chair. The past President is also a member of the board.

Pt VI, Line 7b: The general membership of the organization meets annually, and approves a budget and dues, which are recommended by the SCA Board of Directors. The general membership must also approve any modifications to the organizational bylaws.

Pt VI, Line 11b: After CPA prepares the Form 990, it is forwarded to the Chief Operating Officer and Executive Director; then to the Board Finance Committee; and finally to the full SCA Board of Directors to review before filing.

Pt VI, Line 12c: At the first meeting of the year, each Board member reviews

Name of the organization

Employer identification number

SOUND CITIES ASSOCIATION

91-1616272

and signs the SCA Conflict of Interest Policy. The policy requires a member with a possible conflict to disclose, and potentially withdraw from discussion/voting.

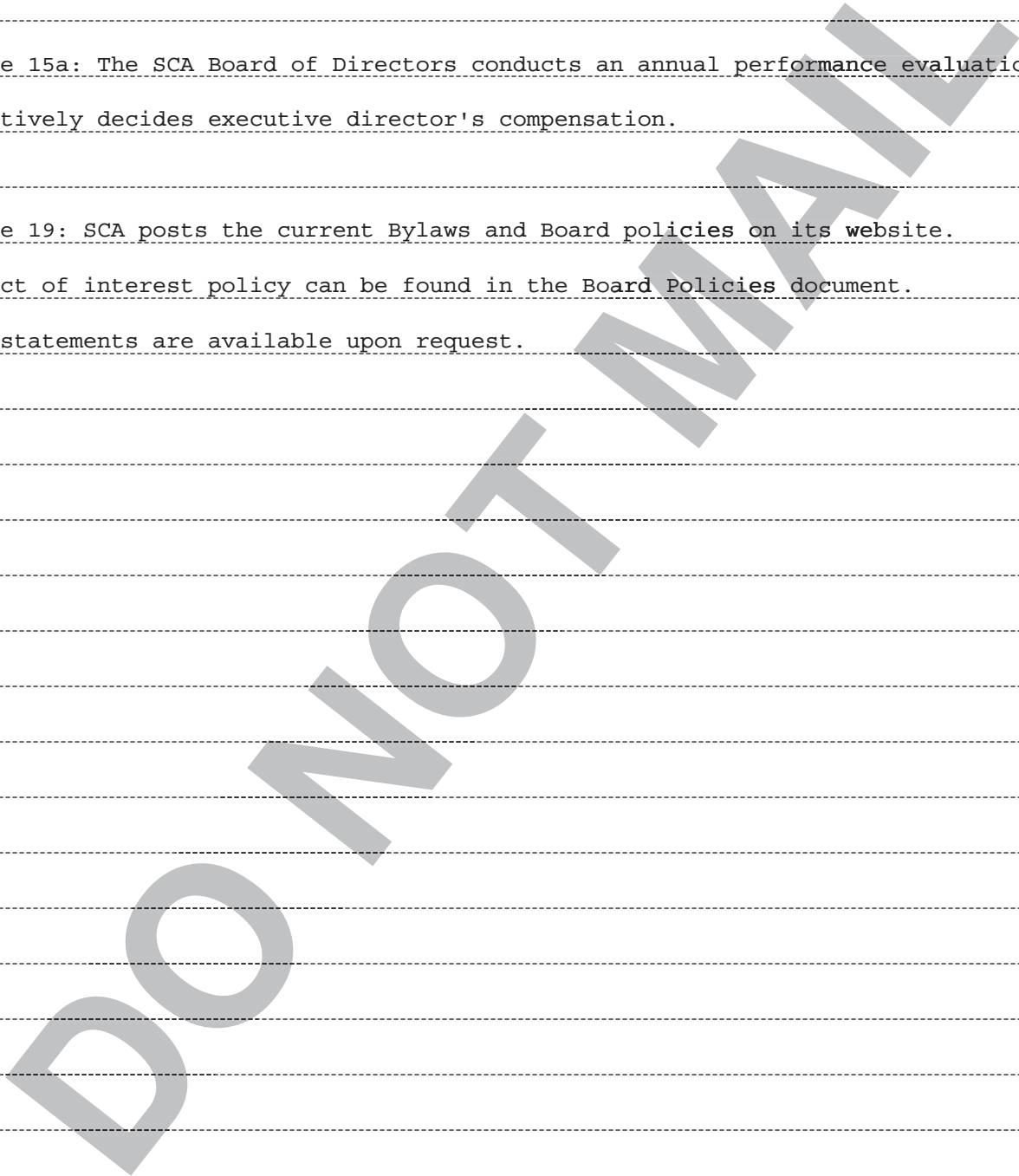
Members are forthcoming with conflicts and self monitor.

Pt VI, Line 15a: The SCA Board of Directors conducts an annual performance evaluation and collectively decides executive director's compensation.

Pt VI, Line 19: SCA posts the current Bylaws and Board policies on its website.

The conflict of interest policy can be found in the Board Policies document.

Financial statements are available upon request.



IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20_____

2023

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer **SOUND CITIES ASSOCIATION** EIN or SSN **91-1616272**

Name and title of officer or person subject to tax
CARL COLE, INTERIM EXECUTIVE DIRECTOR

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, 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.

1a Form 990 check here . . . <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b <u>975,121.</u>
2a Form 990-EZ check here . . . <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9) . . .	2b _____
3a Form 1120-POL check here . . . <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22) . . .	3b _____
4a Form 990-PF check here . . . <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5) . . .	4b _____
5a Form 8868 check here . . . <input type="checkbox"/>	b Balance due (Form 8868, line 3c) . . .	5b _____
6a Form 990-T check here . . . <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4) . . .	6b _____
7a Form 4720 check here . . . <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1) . . .	7b _____
8a Form 5227 check here . . . <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D) . . .	8b _____
9a Form 5330 check here . . . <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19) . . .	9b _____
10a Form 8038-CP check here . . . <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22) . . .	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize PAULSEN, MEGAARD & CO, PS to enter my PIN

1	6	2	7	2
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 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date 10/04/2024

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

9	1	4	8	9	3	9	1	4	8	9
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Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature SUSAN PAULSEN Date 10/07/2024

ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So