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

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

OMB No. 1545-0047

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

A	For the	2020 calend	dar year, or tax year beginning Oct $1$ , 2020, and ending	ng Se	p 30	<b>, 20</b> 21				
В	Check if a	applicable:	C Name of organization STATE ASSOCIATION OF FIRE AND EMERGENC	Y DISTRICTS	D Employe	er identification number	er			
	Address of	change	Doing business as		74-300	6565				
	Name cha	ange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>E</b> Telephor	ne number				
	Initial retu	ırn	P.O. BOX 676		(512)2	51-8101				
	Final retur	n/terminated	City or town, state or province, country, and ZIP or foreign postal code							
	Amended	return	PFLUGERVILLE, TX 78691		<b>G</b> Gross re	ceipts \$ 659,32	25.			
	Application	n pending	F Name and address of principal officer:	H(a) Is this a gro	oup return for su	ubordinates?  Yes X	No			
			CLIFF AVERY, P.O. BOX 676, PFLUGERVILLE, TX 786	91 <b>H(b)</b> Are all su	ubordinates	included? Tes	No			
ı	Tax-exem	npt status:	501(c)(3)	If "No," a	ttach a list.	See instructions				
J	Website:	► WWW.S	AFE-D.ORG	H(c) Group ex	emption nu	mber ▶				
K	Form of or	rganization: 🛚	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of forms	ation: 2001	M State of	legal domicile: TX				
Р	art I	Summa	ry							
	1	Briefly des	cribe the organization's mission or most significant activities: The r	mission of	the Te	exas State				
e			tion of Fire and Emergency Districts is to make							
Activities & Governance			orting and educating the men and women of emer			stricts.				
ē	-		box ▶ ☐ if the organization discontinued its operations or disposed							
Š			voting members of the governing body (Part VI, line 1a)		3		11			
ø	1		independent voting members of the governing body (Part VI, line 1b		4		11			
ies					5		0			
ΞĬ	1		per of volunteers (estimate if necessary)		6	10	00			
Act	1		ated business revenue from Part VIII, column (C), line 12		7a	61,58				
	1		ted business taxable income from Form 990-T, Part I, line 11		7b		0.			
			Prior Year		Current Year					
Revenue	8	Contributio								
			ervice revenue (Part VIII, line 2g)	675,	702.	659,32	5.			
	1									
ď			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			·	0.			
	1		ue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	675	702.	659,32	5			
			d similar amounts paid (Part IX, column (A), lines 1–3)	073,	702.	037,32	<del>J.</del>			
			paid to or for members (Part IX, column (A), line 4)							
S	1		her compensation, employee benefits (Part IX, column (A), lines 5–10)							
Se	1		al fundraising fees (Part IX, column (A), line 11e)							
Expenses			raising expenses (Part IX, column (D), line 25) ▶							
Ж	1		enses (Part IX, column (A), lines 11a-11d, 11f-24e)	451.	324.	486,76	8.			
		•	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		324.	486,76				
		-	ess expenses. Subtract line 18 from line 12	378.	172,55					
es				Beginning of Curre		End of Year	<u>·</u>			
Net Assets or Fund Balances	20	Total asset	ts (Part X, line 16)	434,		607,11	5.			
Ass J Ba	21		ties (Part X, line 26)	,		,				
Fee	22		or fund balances. Subtract line 21 from line 20	434,	558.	607,11	5.			
_	art II	Signatu	re Block		I	•				
Un	der penalt	ies of perjury,	, I declare that I have examined this return, including accompanying schedules and stat	ements, and to the	best of my	knowledge and belief,	, it is			
tru	e, correct,	and complete	e. Declaration of preparer (other than officer) is based on all information of which prepar	er has any knowled	ge.					
Si	gn	Signatu	ure of officer	Date						
He	ere	CLI	FF AVERY, EXECUTIVE DIRECTOR							
			r print name and title							
D-	.i.d	Print/Type	preparer's name Preparer's signature	Date	Check	if PTIN				
Pa		Peter	L. Allman, CPA	01/26/2022	self-employ					
	eparer	Firms's non			EIN ► 46	5-2979080				
Use Only Firm's address ▶ 9600 Great Hills Trail, Suite 150W, Austin, TX 78759 Phone no. (512)502-3077										
Ma	y the IR		this waterway with the green area above above above at a section at				No.			
_	_						$\overline{}$			

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Part	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The mission of the Texas State Association of Fire and Emergency Districts is to make
	Texans safer by supporting and educating the men and women of emergency service districts.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 \$including grants of \$) (Revenue \$)
	The Association produced its Annual Conference and
	other training to educate emergency service professionals in
	efficient operation of emergency services districts.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	The Association monitored and advocated legislation to make
	operation of emergency services districts more effective.
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	Administrative support advancing the Association's mission.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		×
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> See instructions?	2		×
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	×	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
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</i> "Yes," <i>complete Schedule D, Part II</i>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		×
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</i> "Yes," <i>complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		×
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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>	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
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	441		
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		×
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		×
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		×
19	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		×
	If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I. Parts Land II.	21		×

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
32 33	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>	32		×
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
U <del>-1</del>	or IV, and Part V, line 1	34		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		×
36	<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>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	×	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   0		168	INO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1 10	ı 😯 İ	

#### 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b × 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over. a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a × 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? . . . 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c 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 × b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b × Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . . 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7с If "Yes," indicate the number of Forms 8282 filed during the year . . . . . . . . . . . d 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 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? . . . . . . . . . 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? . . . . . . . 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 . . . . . . . . . . . . . 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ... 10b 11 Section 501(c)(12) organizations. Enter: 11a Gross income from other sources (Do not net amounts due or paid to other sources 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year... Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? . . . 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which 13b 13c С 14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . . 14a × If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 15 × If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 16 X If "Yes," complete Form 4720, Schedule O.

Statements Regarding Other IRS Filings and Tax Compliance (continued)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struc	tions.
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		×
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3	×	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		×
6	Did the organization have members or stockholders?	6	×	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	×	
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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		×
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?	11a		×
b	Describe in 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? <i>If "No," go to line 13 </i>	12a	×	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	×	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	×	
13	Did the organization have a written whistleblower policy?	13	$\hat{\mathbf{x}}$	
14	Did the organization have a written document retention and destruction policy?	14	×	
15	Did the process for determining compensation of the following persons include a review and approval by	17		
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b		×
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			,,,
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	. 54		
b	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		
Secti	on C. Disclosure	100		L
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 990-7 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
19	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or	f inter	est p	olicy.
	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 recliff Avery, 200 W. Main, Ste. 200, Pflugerville, TX 78660 (512)251-8101	cords	<b>&gt;</b>	

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

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

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

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

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

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

				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average	(do not check more than one box, unless person is both an		Reportable	Reportable	Estimated amount				
	hours					or/trust		compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MARK JACK	5.00									
PRESIDENT		×		×				0.	0.	0.
(2) BILLY TED SMITH	5.00									
VICE PRESIDENT		×		×				0.	0.	0.
(3) SCOTT MORGAN	5.00									
TREASURER		×		×				0.	0.	0.
(4) CHRISTOPHER CAVAZOS	5.00									
SECRETARY		×		×				0.	0.	0.
(5) PAULA BARR	5.00									
BOARD MEMBER		×						0.	0.	0.
(6) PAUL GRAF	5.00									
BOARD MEMBER		×						0.	0.	0.
(7) JIM CARTER	5.00									
BOARD MEMBER		×						0.	0.	0.
(8) THOMAS NANNINGA	5.00									
BOARD MEMBER		×						0.	0.	0.
(9) JAMES KELLY	5.00									
BOARD MEMBER		×						0.	0.	0.
(10) RUTH HIME	5.00									
BOARD MEMBER		×						0.	0.	0.
(11) CLIFF AVERY	30.00								_	_
EXECUTIVE DIRECTOR		×		×				0.	0.	0.
(12)										
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Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportation from the againstation from the againstation	Part	VII Section A. Officers, Directors,	rustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated E	mplo	yees (continue	ed)
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d Total (add lines 1b and 1c)			 VII Sectio	 n Δ	٠	•	•			0.		0.		<u> </u>
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►    Yes	_								•	0.		0.		0.
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2	Total number of individuals (including but	t not limited					above	e) w	no received mor	e than \$10	00,000	of	
employee on line 1a? If "Yes," complete Schedule J for such individual		reportable compensation from the organi											Yes N	No
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	3												1 - 1 1	×
individual	4													
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person														×
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,00 compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax y  (A)  (B)  (C)  Compensation  Compensation	5	Did any person listed on line 1a receive of	or accrue co	ompe	nsa	tion	fro	m any	/ un	related organiza	tion or ind	ividual		
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax y  (A)  Name and business address  (B)  Description of services  Compensation	Secti		: II 165, C	στηρι	ele	301	ieut	ule J I	OI S	sucri persori .		• •	5	<u>×</u>
(A) Name and business address  (B) Description of services  Compensation	1													
Name and business address Description of services Compensation			ort compen	satior	1 fo	r the	e ca	lenda	r ye		within the	orgar		ar.
2 Total number of independent contractors (including but not limited to those listed above) who			lress								vices			
2 Total number of independent contractors (including but not limited to those listed above) who														
2 Total number of independent contractors (including but not limited to those listed above) who														_
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 ▶	2	•	•	-					th	nose listed abov	e) who			

# Part VIII Statement of Revenue Check if Schedule O contain

ı ar		Check if Schedule O contains a respo	nse or note to an	y line in this Pa	urt VIII		$\sqcap$
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
no G	С	Fundraising events 1c					
ifts r A	d	Related organizations 1d					
i, G nila	е	Government grants (contributions) 1e					
ons Sin	f	All other contributions, gifts, grants,					
utic 1er		and similar amounts not included above 1f					
trib Ott	g	Noncash contributions included in					
on	_	lines 1a–1f					
	h	Total. Add lines 1a–1f					
Ф	0-	MEMBERGHIER DHEG	Business Code	051 050	051 050	2	
Program Service Revenue	2a	MEMBERSHIP DUES CONFERENCES & SEMINARS	900090	251,950. 335,795.	251,950. 335,795.	0.	0.
gram Ser Revenue	b	ADVERTISING	541800	61,580.	0.	61,580.	0.
m (	c d	LEGISLATIVE FUND	900090	10,000.	10,000.	0.	0.
gra Re	e	HEGISHATIVE FUND	900090	10,000.	10,000.	0.	0.
ro	f	All other program service revenue					
ъ.	g g	<b>Total.</b> Add lines 2a–2f	•	659,325.			
	3	Investment income (including dividend		,			
		other similar amounts)		0.	0.	0.	0.
	4	Income from investment of tax-exempt b					
	5	Royalties	▶				
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d		▶				
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
_	_	other than inventory 7a					
evenue	b	Less: cost or other basis					
ver		and sales expenses . <b>7b</b> Gain or (loss) <b>7c</b>					
æ	c d						
Other		Net gain or (loss)					
ğ	Oa	events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	С	Net income or (loss) from fundraising ev	ents ►				
	9a	Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activit	ies ▶				
	10a	Gross sales of inventory, less					
		returns and allowances 10a					
		Less: cost of goods sold 10k					
	С	Net income or (loss) from sales of invent					
Miscellaneous Revenue	110		Business Code				
scellaneo Revenue	11a b						
əlla	C						
SCE	d	All other revenue					
Ξ	-	<b>Total.</b> Add lines 11a–11d	▶				
	12	Total revenue. See instructions	•	659,325.	597,745.	61,580.	0.

## Part IX Statement of Functional Expenses

Sectic	n 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All	other organizations	must complete colun	nn (A).
	Check if Schedule O contains a response	or note to any line	in this Part IX .		
	t include amounts reported on lines 6b, 7b, , 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				
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management	138,000.			
b	Legal	148,841.			
C	Accounting	3,500.			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
10	- '	11 705			
12 13	Advertising and promotion	11,795. 10,029.			
14	Information technology	11,482.			
15	Royalties	11,102.			
16	Occupancy				
17	Travel	109.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	114,596.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,682.			
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	PUBLICATIONS	45,734.			
b					
C					
d	All other eveness				
e 25	All other expenses	106 760			
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	486,768.			
20	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

## Cash—non-interest-bearing	. 1 2 3	(B) End of year 606,220.
The second state of the se	2 3 . 4 5 6 7 8	End of year 606,220.
2 Savings and temporary cash investments	2 3 . 4 5 6 7 8	
3 Pledges and grants receivable, net 4 Accounts receivable, net 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 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) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  10a b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11	3 . 4 . 5 . 6 . 7 . 8	895.
4 Accounts receivable, net	. 4 5 6 7 8	895.
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 7 8	895.
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	6 7 8	
under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).  7 Notes and loans receivable, net	7 8	
8 Inventories for sale or use	8	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a  b Less: accumulated depreciation 10b  11 Investments—publicly traded securities	<del> +</del>	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a  b Less: accumulated depreciation 10b  11 Investments—publicly traded securities	9	
basis. Complete Part VI of Schedule D   10a   b Less: accumulated depreciation   10b   11 Investments—publicly traded securities		
b Less: accumulated depreciation		
<ul> <li>11 Investments—publicly traded securities</li></ul>	10c	
12 Investments – other securities. See Part IV, line 11	11	
	12	
13 Investments – program-related. See Part IV, line 11	13	
14 Intangible assets	14	
<b>15</b> Other assets. See Part IV, line 11	15	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33)	. 16	607,115.
17 Accounts payable and accrued expenses	17	
<b>18</b> Grants payable	18	
<b>19</b> Deferred revenue	19	
20 Tax-exempt bond liabilities	20	
21 Escrow or custodial account liability. Complete Part IV of Schedule D	21	
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	
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	26	
Organizations that follow FASB ASC 958, check here ► ☒ and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions	. 27	607,115.
28 Net assets with donor restrictions	28	
Organizations that follow FASB ASC 958, check here ► ☐ and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here ► ☐ and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total liabilities and net assets/fund balances 33 Total liabilities and net assets/fund balances 434,558		
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	. 32	607,115.
<b>Z</b> 33 Total liabilities and net assets/fund balances	. 33	607,115.

Form 990 (2020) Page **12** 

Part	ΧI	Reconciliation of Net Assets					
		Check if Schedule O contains a response or note to any line in this Part XI					
1	Tota	ıl revenue (must equal Part VIII, column (A), line 12)	1		6.	59,3	25.
2	Tota	ıl expenses (must equal Part IX, column (A), line 25)	2		4	86,7	68.
3	Rev	enue less expenses. Subtract line 2 from line 1	3		1	72,5	57.
4		assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		4	34,5	58.
5		unrealized gains (losses) on investments	5				
6	Don	ated services and use of facilities	6				
7	Inve	stment expenses	7				
8	Prio	r period adjustments	8				
9	Othe	er 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		6	07,1	15.
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		ounting method used to prepare the Form 990: 🗵 Cash 🗌 Accrual 🔲 Other		_			
		e organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
		edule O.					
<b>2</b> a		e the organization's financial statements compiled or reviewed by an independent accountant?		_	2a		×
		es," check a box below to indicate whether the financial statements for the year were cor	npiled	or			
		ewed on a separate basis, consolidated basis, or both:					
		eparate basis					
b		e the organization's financial statements audited by an independent accountant?		_	2b		×
		es," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
		arate basis, consolidated basis, or both:					
		eparate basis					
С		es" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	_				
		audit, review, or compilation of its financial statements and selection of an independent accounts		_	2c		
		e organization changed either its oversight process or selection process during the tax year, e	xplain	on			
		edule O.					
3a		result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in		ا ۔		.,
	_	lle Audit Act and OMB Circular A-133?		_	3a		×
b		es," did the organization undergo the required audit or audits? If the organization did not und			3b		
	requ	ired audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	เนนแร	<u>-                                    </u>		000	(0.5
		REV 09/08/21 PRO			Forn	<b>990</b>	(2020)

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

### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

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

• Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name o	of organization			Employer ider	tification number
STAT	E ASSOCIATION OF	FIRE AND EMERGENCY DIST	TRICTS	74-30065	65
Part	I-A Complete if the	e organization is exempt und	ler section 501(	c) or is a section 527 of	organization.
1	Provide a description of definition of "political can	f the organization's direct and in mpaign activities")	direct political ca	mpaign activities in Part	IV. (See instructions for
2	Political campaign activit	y expenditures (See instructions)			
3	Volunteer hours for politic	cal campaign activities (See instru	ctions)		
Part	I-B Complete if the	e organization is exempt und	ler section 501(	c)(3).	
1	Enter the amount of any	excise tax incurred by the organiz	ation under sectio	n 4955 ▶ \$	
2		excise tax incurred by organizatio	•		
3	•	ed a section 4955 tax, did it file Fo			= =
4a					Yes No
b	If "Yes," describe in Part			.)	( ) (0)
Part	<u> </u>	e organization is exempt und	·	•	(c)(3).
1		ly expended by the filing organize		·	
•	activities	filing organization's funds contril			
2		vities			
3	•	expenditures. Add lines 1 and 2			
J	·			_	
4		n file Form 1120-POL for this year			Yes No
5	organization made payme the amount of political co	ses and employer identification nuents. For each organization listed, ontributions received that were profund or a political action committed.	enter the amount mptly and directly	paid from the filing organi delivered to a separate p	zation's funds. Also enter olitical organization, such
	(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)			-		

Page **2** 

Pa	rt II-A	Complete if the organization section 501(h)).	n is exempt	under section 5	01(c)(3) and filed	d Form 5768 (ele	ction under
A	Check ►	if the filing organization belong	gs to an affilia	ted group (and list	in Part IV each affi	liated group memb	er's name,
	address, EIN, expenses, and share of excess lobbying expenditures).						
В	Check ▶	if the filing organization check	ed box A and	"limited control" p	rovisions apply.		
		Limits on Lobb				(a) Filing	(b) Affiliated
		(The term "expenditures" me	eans amounts	s paid or incurred.	)	organization's totals	group totals
1	l <b>a</b> Total I	Total lobbying expenditures to influence public opinion (grassroots lobbying)			ing)		
	<b>b</b> Total I	obying expenditures to influence a legislative body (direct lobbying)			g)		
	c Total I	Total lobbying expenditures (add lines 1a and 1b)					
	<b>d</b> Other	Other exempt purpose expenditures					
	e Total	Total exempt purpose expenditures (add lines 1c and 1d)					
	-	Lobbying nontaxable amount. Enter the amount from the following table in both columns.					
	If the a	mount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amoun	t is:		
	Not ove	er \$500,000	20% of the a	mount on line 1e.			
	Over \$	500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.		
	Over \$	1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.		
	Over \$	1,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess o	ver \$1,500,000.		
	_	17,000,000	\$1,000,000.				
	-						
		act line 1g from line 1a. If zero or le	•				
		act line 1f from line 1c. If zero or les	•				
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form reporting section 4911 tax for this year?				E Company	Yes No		
	(Son	ne organizations that made a sec	tion 501(h) e	Period Under Sec lection do not hav tructions for lines	e to complete all	of the five column	ns below.
		Lobbying	Expenditure	S During 4-Year A	veraging Period	Г	
	Cal	endar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) Total
2	2a Lobby	ring nontaxable amount					
		ring ceiling amount of line 2a, column (e))					
	c Total I	obbying expenditures					
	d Grass	roots nontaxable amount					
		roots ceiling amount of line 2d, column (e))					
	f Grass	roots lobbying expenditures					

Page **3** 

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed I	Form	5768		
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b)	
	iption of the lobbying activity.	Yes	No	Aı	mount	t
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:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	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					
<b>2</b> a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), c	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	×	<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u> </u>	×
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3	<u> </u>	×
Part	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes."				ine 3	}, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ying				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (See instructions)		5			
Part	• •					
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up list	t); Par	t II-A, I	nes 1	and
	·					

Schedule C (Forn	n 990 or 990-EZ) 2020	Page <b>4</b>
Part IV	Supplemental Information (continued)	

Schedule C (Form 990 or 990-EZ) 2020

### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

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

► Attach to Form 990 or 990-EZ.

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization	Employer identification number
STATE ASSOCIATION OF FIRE AND EMERGENCY DISTRICTS	74-3006565
Pt VI, Line 3: THE ORGANIZATION HAS HIRED A MANAGEMENT COMPANY TO HA	ANDLE ITS
ADMINISTRATIVE OFFICE DUTIES.	
Pt VI, Line 6: THERE ARE MEMBERS AND ASSOCIATE MEMBERS. MEMBERSHIP (	CONSISTS
OF POLITICAL SUBDIVISIONS OF TEXAS, FIRE PREVENTION OR EMERGENCY SE	RVICE DISTRICTS.
Pt VI, Line 11b: THE EXECUTIVE DIRECTOR REVIEWS THE FORM 990 WITH T	HE CPA PREPAPER
AND THE SECRETARY/TREASURER PRIOR TO ITS FILING.	
Pt VI, Line 12c: ALL BOARD MEMBERS ARE REQUIRED TO DECLARE ANY POTE	NTIAL CONFLICTS
OF INTEREST AS THEY ARISE, AND THE PRESIDENT OF THE BOARD MONITORS I	FOR ANY POTENTIAL
CONFLICTS.	
Pt VI, Line 15a: THE BOARD OF DIRECTORS APPROVES THE MANAGEMENT COM	PANY'S CONTRACT.
Pt VI, Line 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF	INTEREST
POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO MEMBERS UPON REQUES	ST.