	00			Deter			<b>F</b>	<b>F</b>		- <b>T</b>		OMB No. 15	45-0047
Form	99			Retu	rn of Or	ganizatio	on Exempt	From in	com	e lax		202	0
			Under s	ection 501	(c), 527, or	4947(a)(1) of t	the Internal Rev	enue Code (e	xcept p	orivate foun	dations)	202	<u> </u>
Departr	Department of the Treasury Do not enter social security numbers on this form as it may be made public.											Open to F	ublic
		le Service		► Go	to www.irs.	gov/Form990	for instructions	and the lates	st infor	mation.		Inspect	ion
A F	or the	2020 calend	ar year, or	tax year b	eginning			, 2020,	and en	ding		, 20	
B CH	neck if a	pplicable:	C Nam	e of organizati	Mationa	l Indian	Education A	ssn			D Emplo	oyer identification r	umber
=	ldress c	hange	Doin	g business as								41-097604	8
=	ame cha	nge	Num	ber and street	(or P.O. box if m	ail is not delivered	to street address)		Room/s	suite	E Teleph	none number	
=	itial retur	'n	L514	P Stree	t NW					В		(202)544-	7290
E Fi	nal retur	n/terminated	City	or town, state o	or province, cou	ntry, and ZIP or for	eign postal code				G Gross	s receipts	
Ar	mended	return	Vashi	ington,	DC 20005	5					\$	1,8	88,557
L Ap	Application pending F Name and address of principal officer: Diana Cournoyer H(a) Is this a group return for sult											for subordinates?	res X No
				as C ab				7		H(b) Are all	subordinate	es included?	res 🗌 No
		•	501(c)(3)	501(c) (	) 🗲 (ins	ert no.)	4947(a)(1) or	527		-		t. See instructions	
	ebsite:		.niea.o		1					H(c) Group			
		_	Corporation	Trust	Association	Other 🕨		L Year of format	tion: 19	970 M	State of leg	al domicile: MN	
Par		Summar											
	1	Briefly descri	be the orga	anization's r	nission or m	ost significant	activities: See	e Schedule	90				
e													
anc													
arn.													
Governance	2	Check this be	ox 🕨 🗌 if i	the organiza	ation discont	tinued its opera	ations or dispose	d of more than	25% o	f its net asse	ets.		
Ċ	3	Number of vo	ting memb	pers of the g	overning bo	dy (Part VI, lin	ie 1a)				. 3		11
ŝ	4	Number of in	dependent	voting men	nbers of the	governing bod	ly (Part VI, line 1I	b)			. 4		11
itie	5	Total number	of individu	als employ	ed in calend	ar year 2020 (l	Part V, line 2a)	·			. 5		14
Activities &	6	Total number				•					. 6		20
¥	-			`		3,	ine 12				. 7a		0
							t I, line 11 • • •				. 7b		0
	~	The amolates					(1, 1110) 11			Prior Year		Current Y	
	8	Contributions	and grant	e (Part \/III	line 1h)								
Ð		8         Contributions and grants (Part VIII, line 1h)         1,774,326           9         Program service revenue (Part VIII, line 2g)         1,423,325										97,430	
Revenue	-										78,436		
eve	10		•			,					7,332		12,361
R							and 11e) • • •				9,531		0
	12				· · ·		olumn (A), line 1	,			1,514	1,8	88,227
				• •	-	( ):	-3)		·	1.	3,934		0
									·				0
S					-		umn (A), lines 5-		·	950	,840	1,0	47,569
Expenses						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			· 🛏				0
cpe			• •		. ,	), line 25)  ト		88,863					
ŵ		•	•			11d, 11f-24e)				2,65	3,560	1,1	66,460
	18	Total expense	es. Add lin	es 13-17 (n	nust equal P	art IX, column	(A), line 25) •		·	3,618	3,334	2,2	14,029
	19	Revenue les	s expenses	s. Subtract	line 18 from	line 12 • • •			•	( 39:	3,820)	(3	25,802)
Net Assets or Fund Balances									Be	ginning of Cur	rent Year	End of Ye	ar
sets alan	20	Total assets	Part X, line	ə16)					· 🖵	1,468	3,641	1,0	16,047
AS AS	21	Total liabilitie	s (Part X, li	ine 26) •					•	322	2,913	1	47,968
Fun	22	Net assets of	fund balaı	nces. Subti	ract line 21 f	rom line 20 🛛				1,14	5,728	8	68,079
Par	t II	Signatu	re Block	Γ.									
							schedules and statem			knowledge and b	elief, it is		
true, c	orrect, a	ind complete. Dee	claration of pre	eparer (other th	an officer) is ba	sed on all informati	ion of which preparer l	has any knowledge	9.				
		Diana	a Courn	over									
Sign	1		e of officer	-							Dat	ie	
Here	•	Diana	Courn	over. Ex	xecutive	Director							
			print name and	-	ACCULTIC	Director							
		Print/Type pre			Preparer	's signature		Date		01	☐ if	PTIN	
Paid	I					•			101	Check	· · ·		7
	arer	John Mu	LINS			Mullins		04-01-20			nployed	P0142930	1
-			-		ns, PC					Firm's EIN 🕨			
Use	Uniy	Firm's address	; P			n Avenue				Phone no.			
			Bethesda MD 20814         202-770           iscuss this return with the preparer shown above? (see instructions)									770-6371	
						· · · · · · · · · · · · · · · · · · ·	ructions) • • •		• • •			X Yes	No
For P	aperw	ork Reduction	on Act Not	ice, see th	e separate i	nstructions.						Form 9	<b>990</b> (2020)

-	n 990 (2020) National Indian Education Assn	41-0976048	Page <b>2</b>
Pa	rt 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:		
	See Schedule O		
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 and the service accomplishments for each of the service accomplishment	red by	
-	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to a		
	the total expenses, and revenue, if any, for each program service reported.	outoro,	
4a	(Code: ) (Expenses \$ 1,243,401 including grants of \$ ) (Revenue	\$	)
τa	Education Reform: NIEA equips all educators with the knowledge and tools nec		,
	Native students in reaching their full potential in the classroom and beyond		
	organization, NIEA has established meaningful and sound relationships among advocacy leaders on local and national levels. Through strong relationships		
	advocacy readers on rocar and national revers. Inrough strong relationships and national organizations, NIEA serves as the critical link between Native		
			ha the
	diverse array of institutions that serve Native students from cradle to coll	.ege.	
46	(Code: ) (Expenses \$ 343,746 including grants of \$ ) (Revenue		
4b		-	)
	Other Program Services: Through our national resource center, NIEA works wit		achers,
	administrators, and researchers to equip them with professional learning opp		
	educational capacity building and strategies needed to provide our next gene		
	youth the knowledge for college, career and life success. The organization a		
	by adhering to our founding principles - to convene educators to explore way		
	schools and the educational systems serving Native children; to promote the		
	continued development of language and cultural programs; and to develop and		
	for influencing policy change. NIEA supports tribal leadership, educators, a		
	timely, relevant information on effective advocacy for Native education. NIE		
	training and technical assistance, webinars, and fact sheets to ensure our a	dvocates have	the
	resources and information needed.		
<u> </u>			
4c	(Code:) (Expenses \$3,038 including grants of \$) (Revenue		
	Conventions: The annual organization convention is hosted in various regions		
	ensure the organization has a broad reach and representative of Native and n		
	and advocates. The convention brings together pre-K through college educator		
	parents, community, tribal leadership and researchers to explore and exchang		ork, and
	learn of innovative strategies pertaining to education, culture and language	! •	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses  1,820,185		
EEA		Form <b>!</b>	<b>990</b> (2020)

	m 990 (2020) National Indian Education Assn art IV Checklist of Required Schedules	41-0
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	
2	complete Schedule A	

2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	x	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	x	
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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
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		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	1		1

Yes

х

No

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Pa	rt IV Checklist of Required Schedules (continued)				
				Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the				
	organization's current and former officers, directors, trustees, key employees, and highest compensated				
24-	employees? If "Yes," complete Schedule J		23	x	<u> </u>
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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24a 24b		
c	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		x
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		x
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 or any of these persons? If "Yes," complete Schedule L, Part II		26		x
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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part				
	IV instructions, for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
	"Yes," complete Schedule L, Part IV		28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If				
	"Yes," complete Schedule L, Part IV		28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified				
	conservation contributions? If "Yes," complete Schedule M		30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				
	complete Schedule N, Part II		32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations				
~ .	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		~		
25-	or IV, and Part V, line 1		34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		x
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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		350		
30	related organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·		36		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		30		x
51	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		37		v
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		57		<u>x</u>
50	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.		38	x	
Par			50	~	L
ı ai	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	14		.03	
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	<u>J</u>			
-	reportable gaming (gambling) winnings to prize winners?		1c	x	

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
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? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		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			
ŭ	and services provided to the payor?	7a	х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	x	<u> </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10	~	<u> </u>
C	required to file Form 8282?	7c		v
A	If "Yes," indicate the number of Forms 8282 filed during the year	70		x
d		70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>x</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
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		<u> </u>
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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		└───
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.) • • • • • • • • • • • • • • • • • • •			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see instructions and file Form 4720, Schedule N.	-		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
-	If "Yes," complete Form 4720, Schedule O.			

Form	990	(2020)
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Pai	t 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 in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			. x
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6	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?	7a	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?	7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		~	
Ū	the year by the following:			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	<u> </u>		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	163	No X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	104		
D.	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	x	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	110	^	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	v	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	x x	
0	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>	120	~	
U		12c	v	
13	Did the organization have a written whistleblower policy?	13	x	
13 14	Did the organization have a written document retention and destruction policy?	14	x	
		14	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?	450		
a h	The organization's CEO, Executive Director, or top management official	15a 15b	х	
b		150		x
40-	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	40-		
<b>L</b>	with a taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	401		
800	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed <b>District of Columbia, Minnesota</b>			
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.			
	X       Own website       Image: Another's website       X       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	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			
	The Organization (202)544-7290, 1514 P Street NW, Washington, DC 20005			

Form 990 (20	20) National Indian Education Assn	41-0976048	Page 7						
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co Independent Contractors	mpensated Employe	es, and						
	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.

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

				(	(C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average	,				han one s both a		Reportable	Reportable	Estimated amount
	hours					/trustee		compensation	compensation	of other
	per week (list any							from the organization	from related organizations	compensation from the
	hours for	Individual trustee or director	Inst	Office	Ke)	Hig	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	lirect	Institutional trustee	cer	Key employee	hest ploye	mer			related organizations
	organizations	or al tru	onalt		ploye	com				
	below dotted line)	Istee	ruste		ě	pens				
	dotted line)		ĕ			Highest compensated employee				
						-				
(1) Diana_Cournoyer	40.00									
Executive Director				x		х		135,000	0	24,230
(2) Christopher Topoleski	40.00									
Legislative Director						х		96,519	0	12,679
(3) Brandon Thoms	<u>2.00</u>									
Board Member		х						0	0	0
(4) Brenda Deese	<u>2.00</u>									
Board Member		х						0	0	0
(5) Jaylyn Suppah	<u>2.00</u>									
Board Member		х						0	0	0
(6) Teresa Sarabia	<u>2.00</u>									
Board Member		х						0	0	0
(7) Tesia Zientek	<u>2.00</u>									
Board Member		х						0	0	0
(8) Jolene Bowman	<u>5.00</u>									
Board Member		х						0	0	0
(9) Jason P. Dropik	<u>5.00</u>									
President		х		x				0	0	0
(10)Patricia_Whitefoot	<u>5.00</u>									
2nd Vice President		х		x				0	0	0
(11)Sylvia Hussey	<u>5.00</u>									
Treasurer		х		x				0	0	0
(12)Connie Oxendine Locklear	<u>2.00</u>									
1st Vice President		х		x				0	0	0
(13)Lori_Quigley	<u>5.00</u>									
Secretary		х		x				0	0	0
<u>(14)</u>										

# Form 990 (2020)

Page 8

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
						(C)							
	(A)	(B)	(1	4 . 1.		sition			(D)	(E)		(F)	
	Name and title	Average	`				han one s both a		Reportable	Reportable	Estin	nated am	ount
	hours					/trustee		compensation	compensation		of other		
	per week							from the organization	from related organizations		mpensat from the	ion	
		(list any hours for	oro	Inst	Office	Ke)	Hig	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	orga	anization	
		related	lirec	titutio	cer	/ em	hest ploy	mer			relate	d organiz	zations
		organizations	tor tr	onal		Key employee	ee						
		below	Individual trustee or director	nstitutional trustee		ee	Ipen						
		dotted line)		ee			Highest compensated employee						
											<b>_</b>		
<u>(15)</u>													
											+		
<u>(16)</u>													
											+		
<u>(17)</u>													
(4.0)													
<u>(18)</u>													
(40)											+		
<u>(19)</u>													
(20)											+		
<u>(</u> <u>2</u> <u>0</u> )													
(21)											+		
<u>\</u> '/													
(22)											+		
<u>\-</u> =/													
(23)													
<u> </u>													
(24)													
(25)													
1b	Subtotal							•					
С	Total from continuation sheets to Part VII, Sec	tion A .		• •				•					
d	Total (add lines 1b and 1c)									0		36,9	<del>)</del> 09
2	Total number of individuals (including but not limit	ed to those I	isted a	bove	e) w	ho re	eceive	d mo	ore than \$100,000	of			
	reportable compensation from the organization												1
											_	Yes	No
3	Did the organization list any former officer, directed			-		-							
	employee on line 1a? If "Yes," complete Schedule										3		x
4	For any individual listed on line 1a, is the sum of r												
	organization and related organizations greater that												
	individual										4	x	<u> </u>
5	Did any person listed on line 1a receive or accrue				-		-	-			_		
Saati	for services rendered to the organization? If "Yes, on B. Independent Contractors	" complete S	Schedu	ile J	tor s	such	perso	n			5		Х
	•	atad indona	adapt			wa th		<u>ai.</u>	d more than \$100	000 of			
1	Complete this table for your five highest compens												
	compensation from the organization. Report comp	pensation for	the ca	alenc	ar y	ear	enaing	j wit					
	(A)								(B)		(C)		
	Name and business addres								Description of servic	.53	Compens	sauoli	
2	Total number of independent contractors (includin	a but not lim	ited to	thos	se lis	sted	above	) wh	0				

►

received more than \$100,000 of compensation from the organization

Form 99			nal	Indian	Educ	ation Assn			41-09760	48 Page 9
Part '	VIII	Statement of Rev		-						
		Check if Schedule O co	ontains	s a respons	e or n	ote to any line in th				<u></u>
							<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .			1a					
ដ្	b	Membership dues			1b					
ount	с	Fundraising events			1c					
Amo Amo	d	Related organizations .			1d					
ilar,	е	Government grants (cont			1e	899,988				
Sim,	f	All other contributions, git	-							
her		and similar amounts not i			1f	397,442				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions inclusion lines 1a-1f			1g	\$				
a S	h	Total. Add lines 1a-1f					1,297,430			
						Business Code	172577150			
Ð	2a	Convention				900099	371,250	371,250		
Š,	1	Membership Dues				900099	108,355	108,355		
Ser	c	Training & Tech A	ssis	sta		900099	98,831	98,831		
Program Service Revenue	d									
ogr R	е									
ፈ		All other program service								
	g	Total. Add lines 2a-2f .					578,436			
	3	Investment income (includ					10 001			10 001
	4	other similar amounts) . Income from investment or					12,691			12,691
	5	Royalties								
			$\square$	(i) Rea		(ii) Personal				
	6a	Gross rents	6a	()	-	(				
	b	Less: rental expenses	6b							
	c	Rental income or (loss)	6c							
	d	Net rental income or (loss)				ト				
	7a	Gross amount from		(i) Securiti	es	(ii) Other				
		sales of assets								
	Ι.	other than inventory	7a							
e	b	Less: cost or other basis	76							
Other Revenue		and sales expenses Gain or (loss)			<u>330</u> 330					
Sev		Net gain or (loss)	· · · ·		•	4	(330)			(330
erF		Gross income from fundra					(330)			(350
gh		events (not including \$	5							
		of contributions reported o	n line		-					
		1c). See Part IV, line 18			8a					
		Less: direct expenses .			8b					
		Net income or (loss) from		aising even	ts 🕂	<u></u> •				
	9a	Gross income from gaming	-							
		activities, See Part IV, line			9a 9b					
		Less: direct expenses . Net income or (loss) from				└ · · · · · · ►				
			-	ig activities	· · ·					
	10a	Gross sales of inventory, le returns and allowances			10a					
	b	Less: cost of goods sold			10					
	1	Net income or (loss) from								
		. ,				Business Code				
50	11a	Other Revenue				900099				
and and	b									
6V6	c									ļ
miscellanous Revenue	1	All other revenue								
		Total. Add lines 11a-11d								
	17	Total revenue See instru	TIONE				1 888 227	578 436	0	12 361

#### National Indian Education Assn **Statement of Functional Expenses** Part IX

	Check if Schedule O contains a response or note to	,		(0)	
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	135,000	105,895	19,042	10,063
6	Compensation not included above, to disgualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	726,269	569,693	102,440	54,136
8	Pension plan accruals and contributions (include	, 20, 209		102/110	51/130
5	section 401(k) and 403(b) employer contributions)	23,695	18,587	3,342	1,766
9	Other employee benefits	86,356	67,738	12,180	6,438
10		76,249	59,810	10,755	5,684
11	Fees for services (nonemployees):	70,249	55,010	10,755	5,004
a	Management				
b		275		275	
c		105,581	2,645	102,936	
d		105,581	2,045	102,930	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	E 222		E 222	
		5,333		5,333	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
10	(A) amount, list line 11g expenses on Schedule O.)	657,661	657,661		(100)
12	Advertising and promotion	2,143	2,263	2 252	(120)
13	Office expenses	96,134	90,307	3,373	2,454
14		55,523	47,343	5,298	2,882
15			=		
16	Occupancy	66,488	52,421	9,066	5,001
17		59,024	56,440	2,290	294
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	74,872	70,726	4,360	(214)
20		5,008		5,008	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	294	232	40	22
23		4,188	1,569	2,469	150
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	Insurance	5,878	5,631	237	10
b	Bank and Credit Card Fees	12,715	11,224	1,194	297
С	Miscellaneous	15,343		15,343	
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,214,029	1,820,185	304,981	88,863
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 <b>I</b> if				
	following SOP 98-2 (ASC 958-720)				

Form 990	(2020)	National	Indian	Education	Assn
Part X	Balance	Sheet			

Pag	e 1	1

Part	: X	Balance Sheet			· · · · · · · · · · · · · · · · · · ·
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
	-		Beginning of year		End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	618,535	2	315,836
	3	Pledges and grants receivable, net	420,030	3	136,503
	4	Accounts receivable, net	1,893	4	80,734
	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	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	57,451	9	56,920
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 25,028			
	b	Less: accumulated depreciation 10b 25,028	294	10c	
	11	Investments - publicly traded securities	361,610	11	416,726
	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	8,828	15	9,328
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,468,641	16	1,016,047
	17	Accounts payable and accrued expenses	317,728	17	145,640
	18	Grants payable		18	
	19	Deferred revenue	3,060	19	1,410
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		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	2,125	25	918
	26	Total liabilities. Add lines 17 through 25	322,913	26	147,968
		Organizations that follow FASB ASC 958, check here			
ses		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	350,622	27	221,470
Bal	28	Net assets with donor restrictions	795,106	28	646,609
l pu		Organizations that do not follow FASB ASC 958, check here			
Fu		and complete lines 29 through 33.			
٩ ٥	29	Capital stock or trust principal, or current funds		29	
ers	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
ASS	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	1,145,728	32	868,079
z	33	Total liabilities and net assets/fund balances	1,468,641	33	1,016,047

EEA

Form 990 (2020)

Form	1990 (2020) National Indian Education Assn	41-097604	8	Pa	age <b>12</b>
Pa	rt 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	1,	888,	227
2	Total expenses (must equal Part IX, column (A), line 25)		2,	214,	029
3	Revenue less expenses. Subtract line 2 from line 1	. 3	(	325,	802)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		1,	145,	728
5	Net unrealized gains (losses) on investments			48,	153
6	Donated services and use of facilities	. 6			
7	Investment expenses				
8	Prior period adjustments	- 8			
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10		868,	079
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u>.                                    </u>
				Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🕱 Accrual 🗌 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c	х	
	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				
	Single Audit Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
				000 /	

EEA

Form 990 (2020)

SCHEDULE A
(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

OMB No. 1545-0047 2020

Department of the Treasury				Attac	Open to Public				
	Internal Revenue Service <b>Go</b>			to www.irs.gov/Form990 for instructions and the latest information.					Inspection
Name	of th	e organization						Employer identifica	tion number
Nat	ion	al Indian	Education Assn	n 41-0976048					
Pa	rt I	Reason	for Public Charit	y Status. (All o	rganizations must o	complete	e this par	t.) See instructio	ns.
The	orga	nization is not a	private foundation be	cause it is: (For line	s 1 through 12, check on	ly one box	.)		
1	Ň	A church, conv	ention of churches, or	association of chur	ches described in sectio	on 170(b)(1	)(A)(i).		
2	Π				chedule E (Form 990 or				
3	П		• •		described in section 17		iii).		
4	Η			•	with a hospital described			)(A)(iii) Enter the	
-			e, city, and state:						
5			·	ofit of a collogo or i	iniversity owned or opera	atod by a d	overnmen	tal unit described in	
5		-		-	iniversity owned or opera	aleu by a g	overnmen		
6			(1)(A)(iv). (Complete	,	it described in <b>eastion 4</b>	70/6\/4\/A	14.0		
6	H		•	-	it described in section 1				
7	Ш	•	•		t of its support from a gov	vernmenta	i unit of fro	m the general public	
			ection 170(b)(1)(A)(vi)		,				
8	Ц		ust described in <b>secti</b>						
9	Ш	0	0		on 170(b)(1)(A)(ix) opera			<b>o o</b>	e
		or university or	a non-land-grant colle	ege of agriculture (s	ee instructions). Enter th	ie name, c	ity, and sta	te of the college or	
	_	university:							
10	х	An organization	n that normally receive	es: (1) more than 33	8 1/3% of its support from	1 contributi	ons, memb	pership fees, and gros	SS
		•		•	ubject to certain exception	•	,		
					siness taxable income (l		,	rom businesses	
	_	acquired by the	e organization after Ju	ne 30, 1975. See <b>s</b> e	ection 509(a)(2). (Compl	ete Part III	.)		
11	Ц	An organizatio	n organized and opera	ated exclusively to te	est for public safety. See	section 5	09(a)(4).		
12		An organizatio	n organized and opera	ated exclusively for	the benefit of, to perform	the function	ons of, or to	o carry out the purpos	ses
		of one or more	publicly supported org	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section !	509(a)(2). S	See section 509(a)(3	).
		Check the box	in lines 12a through 1	2d that describes the	ne type of supporting org	anization a	and comple	ete lines 12e, 12f, and	12g.
	а	<b>Type I.</b> A s	supporting organization	n operated, supervis	sed, or controlled by its s	upported c	organizatio	n(s), typically by givin	g
		the suppor	ted organization(s) the	e power to regularly	appoint or elect a major	ity of the d	irectors or	trustees of the	
		supporting	organization. You mu	ist complete Part I	V, Sections A and B.				
	b	Type II. A	supporting organizatio	n supervised or cor	trolled in connection with	n its suppo	rted organi	ization(s), by having	
		control or r	management of the su	pporting organization	on vested in the same pe	rsons that	control or	manage the supporte	d
		organizatio	on(s). You must comp	olete Part IV, Section	ons A and C.				
	С	U Type III fu	nctionally integrated	. A supporting orga	nization operated in conr	ection with	n, and func	tionally integrated with	h,
		its support	ed organization(s) (se	e instructions). <b>You</b>	must complete Part IV	, Sections	A, D, and	E.	
	d	Type III no	on-functionally integr	rated. A supporting	organization operated in	connectio	n with its su	upported organization	n(s)
		that is not	functionally integrated	. The organization g	enerally must satisfy a d	listribution	requireme	nt and an attentivene	SS
		requireme	nt (see instructions). Y	ou must complete	Part IV, Sections A and	d D, and P	art V.		
	е	Check this	box if the organization	n received a written	determination from the I	RS that it i	s a Type I,	Type II, Type III	
		functionally	/ integrated, or Type II	I non-functionally in	tegrated supporting orga	nization.			
	f	Enter the num	per of supported organ	nizations					
	g	Provide the fol	owing information abo	out the supported or	ganization(s).			i	-i
	(i	) Name of supported	organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	•	(v) Amount of monetary	(vi) Amount of
					(described on lines 1-10 above (see instructions))	listed in you docum	ir governing ent?	support (see instructions)	other support (see instructions)
					,/				
						Yes	No		
(A)									
(, ,									
(B)									
(C)									
(D)									
(D)									
(E)									
Tota	I I								1

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			cation Assn			41-097604	
Pa	rt II Support Schedule for Organiz						
	(Complete only if you checked th						lify under
_	Part III. If the organization fails to	o qualify und	er the tests li	sted below, p	lease comple	ete Part III.)	
	ction A. Public Support		i	i	i	<u>.</u>	
Cal	endar year (or fiscal year beginning in)►	<b>(a)</b> 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	- , <b>3</b> ,						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6							
	ction B. Total Support			•			
	endar year (or fiscal year beginning in)►	<b>(a)</b> 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	<b>(f)</b> Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities, etc. (s						
13	First five years. If the Form 990 is for the o	0				· · ·	/
	organization, check this box and <b>stop here</b>						▶□
	ction C. Computation of Public Suppo						
	Public support percentage for 2020 (line 6, o					14	%
	Public support percentage from 2019 Sched					15	%
16a	33 1/3% support test - 2020. If the organiza						
	box and stop here. The organization qualified		• • • •	-			_
k	33 1/3% support test - 2019. If the organization						_
	this box and <b>stop here.</b> The organization qu						
17a	10%-facts-and-circumstances test - 2020						
	10% or more, and if the organization meets						
	Part VI how the organization meets the facts			-	-		
	organization						
k	10%-facts-and-circumstances test - 2019	•					
	15 is 10% or more, and if the organization m						
	in Part VI how the organization meets the fa			-			
	organization						_
18	Private foundation. If the organization did r						
	instructions						<b>&gt;</b> []

# National Indian Education AssnSupport Schedule for Organizations Described in Section 509(a)(2)

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

	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)►	(a) 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	(e) 2020	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	294,356	715,858	1.367.767	1,774,326	1,297,430	5,449,737
2	Gross receipts from admissions, merchandise		,			_/_/ _/ _00	
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	801 008	802 004	802 880	1 400 005	070 400	2 000 560
2		791,207	703,824	/93,//0	1,423,325	278,436	3,990,562
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	1,085,563	1,419,682	2,161,537	3,197,651	1,575,866	9,440,299
7a	Amounts included on lines 1, 2, and 3					, ,	
	received from disqualified persons	4,009	6,304	2,134	1,705		14,152
b	Amounts included on lines 2 and 3	1,005	07501	27151	17/05		11/152
~	received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
~	Add lines 7a and 7b	1 000	<	0 1 2 4	1 505		14.150
	Public support. (Subtract line 7c from	4,009	6,304	2,134	1,705		14,152
0							
800	line 6.)						9,426,147
	ction B. Total Support						
	endar year (or fiscal year beginning in)►	(a) 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	(d) 2019	(e) 2020	<b>(f)</b> Total
9	Amounts from line 6	1,085,563	1,419,682	2,161,537	3,197,651	1,575,866	9,440,299
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources •••	9,007	10,257	17,680	13,209	12,691	62,844
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b	9,007	10,257	17,680	13,209	12,691	62,844
11	Net income from unrelated business	57007	207207	27,7000	10/200		02/011
••	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
12	-						
	loss from the sale of capital assets						
40	(Explain in Part VI.)	5,950	1,380		9,531		16,861
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)				3,220,391		9,520,004
14	First 5 years. If the Form 990 is for the orga				•		,
_	organization, check this box and stop here						🕨 🗋
	ction C. Computation of Public Suppo					-, -,	
	Public support percentage for 2020 (line 8, c		•	( ) )		15	99.01 %
	Public support percentage from 2019 Sched					16	84.62 %
Sec	ction D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2020 (line	e 10c, column (	f), divided by I	ine 13, column	ı (f))	17	1.00 %
18	Investment income percentage from 2019 S	chedule A, Par	t III, line 17 .			18	1.00 %
	33 1/3% support tests - 2020. If the organiz					e than 33 1/3%.	, and line
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2019. If the organiz	•	-	-	• •		_
	line 18 is not more than 33 1/3%, check this						
20	<b>Private foundation.</b> If the organization did r	•	-	-		• • • •	- =
-	· · · · · · · · · · · · · · · · · · ·		,				

#### Part IV Supporting Organizations (Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No Are all of the organization's supported organizations listed by name in the organization's governing 1 documents? If "No," describe in Part VI how the supported organizations are designated. If designated by 1 class or purpose, describe the designation. If historic and continuing relationship, explain. 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported 2 organization was described in section 509(a)(1) or (2). 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below. 3a **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the 3b organization made the determination. c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3c 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below. 4a **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion 4b despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination С under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). 5a b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 7 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? 8 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8 **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. 9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which b the supporting organization had an interest? If "Yes," provide detail in Part VI. 9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit С from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below. 10a Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to b determine whether the organization had excess business holdings.) 10b EEA Schedule A (Form 990 or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020

## Section B. Type I Supporting Organizations

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,
	supervised, or controlled the supporting organization.

#### Section C. Type II Supporting Organizations

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

#### Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have	-		
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- **a** The organization satisfied the Activities Test. *Complete line 2 below.*
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- c The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).
- Activities Test. Answer lines 2a and 2b below. 2
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

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No

No

Yes

Yes

1

2

1

Yes

Yes

No

No

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See						
	instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sec	Section A - Adjusted Net Income (A) Prior Year (B) Current Year (optional)						
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or collection						
	of gross income or for management, conservation, or maintenance of						
	property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in <b>Part VI</b> ):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sec	tion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functionally	integ	grated Type III supporting	g organization			
	(see instructions).						

National Indian Education Assn

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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	National Indian Education				5048 Page 7			
Par	t V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continue	<i>a)</i>				
Sec	Section D - Distributions Current Year							
1	Amounts paid to supported organizations to accomplish exen	npt purposes		1				
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported						
	organizations, in excess of income from activity			2				
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizat	tions	3				
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required) - pr	rovide details in <b>Part VI</b> )		5				
6	Other distributions (describe in Part VI). See instructions.			6				
7	Total annual distributions. Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the	e organization is respon	sive					
	(provide details in <b>Part VI</b> ). See instructions.			8				
	Distributable amount for 2020 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount			10				
	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ns	(iii) Distributable Amount for 2020			
	Distributable amount for 2020 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2020							
	(reasonable cause required - <i>explain in Part VI</i> ). See							
	instructions.							
	Excess distributions carryover, if any, to 2020							
	From 2015							
	From 2016							
	From 2017							
	From 2018							
	From 2019							
	Total of lines 3a through 3e							
	Applied to underdistributions of prior years							
	Applied to 2020 distributable amount							
i	Carryover from 2015 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2020 from							
	Section D, line 7: \$							
a	Applied to underdistributions of prior years							
	Applied to 2020 distributable amount							
	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2020, if							
	any. Subtract lines 3g and 4a from line 2. For result							
	greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.							
6	Remaining underdistributions for 2020. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2021. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
a	Excess from 2016							
b	Excess from 2017							
С	Excess from 2018							
d	Excess from 2019							
е	Excess from 2020							
EEA				Sched	iule A (Form 990 or 990-EZ) 2020			

	n 990 or 990-EZ) 2020 Pag
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part
	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section
	B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2
	3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section I
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE C		Political Campaign an	Political Campaign and Lobbying Activities		
(Form 990 or 990-EZ)					2020
		e if the organization is described belo			
Department of the Treasury Internal Revenue Service	P Complet	► Go to www.irs.gov/Form990 for in			Open to Public Inspection
<ul> <li>Section 501(c)(3) o</li> <li>Section 501(c) (oth</li> <li>Section 527 organizing</li> <li>If the organization answ</li> <li>Section 501(c)(3) o</li> <li>Section 501(c)(3) o</li> <li>If the organization answ</li> <li>Tax) (see separate inst</li> </ul>	rganizations: C er than sectior zations: Compl wered "Yes," ( rganizations th rganizations th wered "Yes," ( ructions), the 5), or (6) organ	on Form 990, Part IV, line 4, or Form 9 lat have filed Form 5768 (election under lat have NOT filed Form 5768 (election u on Form 990, Part IV, line 5 (Proxy Tax n hizations: Complete Part III.	ete Part I-C. ts I-A and C below. I <b>90-EZ, Part VI, line</b> section 501(h)): Cor under section 501(h)	Do not complete Part I-B. <b>47 (Lobbying Activities), then</b> mplete Part II-A. Do not complete ): Complete Part II-B. Do not cor	e Part II-B. nplete Part II-A. rt V, line 35c (Proxy cation number
		organization is exempt unde	r section 501(c		
		nization's direct and indirect political can	•	· · · · · · · · · · · · · · · · · · ·	
definition of "polition				,	
2 Political campaign	activity expen	ditures (See instructions)		· · · · · · · · · · • • • • • • • • • •	
	· ·	paign activities (See instructions)			
		organization is exempt unde			
		ax incurred by the organization under se			
		ax incurred by organization managers u			<u> </u>
•		tion 4955 tax, did it file Form 4720 for th	•		= =
					. Yes No
b If "Yes," describe in Part I-C Com		organization is exempt unde	r section 501(c	) except section 501(c)	(3)
		led by the filing organization for section	•		(0).
		anization's funds contributed to other or		·	
			-		
3 Total exempt funct	ion expenditur	es. Add lines 1 and 2. Enter here and or	Form 1120-POL,		
		m 1120-POL for this year?			
5 Enter the names, a	addresses and	employer identification number (EIN) of	all section 527 politi	cal organizations to which the fil	ing
-		r each organization listed, enter the amo			
•		ns received that were promptly and dire			
as a separate seg	regated fund o	r a political action committee (PAC). If ac	dditional space is ne	eded, provide information in Pari	t IV.
<b>(a)</b> 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)					

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Sche		n Education Assn	41-09760	
Pa		is exempt under section 501(c)(3) and filed	d Form 5768 (elec	tion under
	section 501(h)).			
Α	Check 🕨 🗌 if the filing organization belongs to ar	n affiliated group (and list in Part IV each affiliated group m	ember's name,	
	address, EIN, expenses, and share o	of excess lobbying expenditures).		
B	Check      fithe filing organization checked box	A and "limited control" provisions apply.		
	Limits on Lobbyi	ng Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" mea	ans amounts paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence public opini	ion (grassroots lobbying)		
b	Total lobbying expenditures to influence a legislative	e body (direct lobbying)	2,578	
С	Total lobbying expenditures (add lines 1a and 1b)		2,578	
d	Other exempt purpose expenditures		2,211,450	
е	Total exempt purpose expenditures (add lines 1c ar	nd 1d) • • • • • • • • • • • • • • • • • • •	2,214,028	
f	Lobbying nontaxable amount. Enter the amount from	m the following table in both		
	columns.		260,701	
	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 1	f)	65,175	
h	Subtract line 1g from line 1a. If zero or less, enter -	)		
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 1	Ih or line 1i, did the organization file Form 4720		
	reporting section 4911 tax for this year?			🗌 Yes 🗌 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)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> Total
2a	Lobbying nontaxable amount	239,906	265,334	330,917	260,701	1,096,858
b	Lobbying ceiling amount (150% of line 2a, column (e))					1,645,287
c	Total lobbying expenditures	8,828	7,840	1,233	2,578	20,479
d	Grassroots nontaxable amount	59,977	66,334	82,729	65,175	274,215
e	Grassroots ceiling amount (150% of line 2d, column (e))					411,323
f	Grassroots lobbying expenditures					

EEA

Schedule C (Form 990 or 990-EZ) 2020

	ule C (Form 990 or 990-EZ) 2020 National Indian Education Assn	41-	0976	048	⊃age <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT	filed I	Form	5768	
_	(election under section 501(h)).	(;	a)	(b)	
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed				
des	cription of the lobbying activity.	Yes	No	Amoun	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				
2a	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				
С	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?				
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	c)(5),	or se	ection	
	<b>501(c)(6)</b> .				
				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				3	
Ра	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)				• •
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O	R (D)	Part	III-A, IIne	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).				
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 the				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
	and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (See instructions)	••	5		
	rt IV Supplemental Information				
	ide 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, l ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.	ines 1	and		

SCHEE	DULE D	
(Form	990)	

## **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. OMB No. 1545-0047

Inspection

Open to Public

Department of the Internal Revenue							
Name of the organization							
National	Indian	Educatio					

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

Employer identification	number
41-0976048	

	ional Indian Education Assn		41-0976048
Pa	rt I Organizations Maintaining Donor Advised Fi	unds or Other Similar Funds or Acco	ounts.
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year ............		
2	Aggregate value of contributions to (during year) • • • • •		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advised	
	funds are the organization's property, subject to the organizati	-	No
6	Did the organization inform all grantees, donors, and donor ad		
	only for charitable purposes and not for the benefit of the donc		
	conferring impermissible private benefit?		
Pa	rt II Conservation Easements.		
	Complete if the organization answered "Yes" o	n Form 990. Part IV. line 7.	
1	Purpose(s) of conservation easements held by the organization		
-	Preservation of land for public use (e.g., recreation or edu		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifier	d conservation contribution in the form of a c	conservation
2	easement on the last day of the tax year.		
-			Held at the End of the Tax Year
a h			
b	• •		
C	Number of conservation easements on a certified historic structure of conservation easements included in (c) convinced		<u>2c</u>
d	Number of conservation easements included in (c) acquired a		
•	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the org	janization during the
	tax year		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing conserva	ation easements during the year
_	• <u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing conservation	easements during the year
_	▶\$		
8	Does each conservation easement reported on line 2(d) above	<b>,</b> , , , , , , , , , , , , , , , , , ,	
_			
9	In Part XIII, describe how the organization reports conservatio		
	balance sheet, and include, if applicable, the text of the footno	te to the organization's financial statements	that describes the
Do	organization's accounting for conservation easements.	of Art Historical Tracquires or	Other Similar Acceto
Pa	rt III Organizations Maintaining Collections		other Similar Assets.
	Complete if the organization answered "Yes" of		
1a	If the organization elected, as permitted under FASB ASC 958		
	of art, historical treasures, or other similar assets held for publ		erance of public
	service, provide, in Part XIII the text of the footnote to its finan		
b	If the organization elected, as permitted under FASB ASC 958	•	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthera	nce of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		· · · · · · <b>&gt;</b> \$
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financial ga	in, provide the
	following amounts required to be reported under FASB ASC 9	÷	
а	Revenue included on Form 990, Part VIII, line 1		· · · · · · ▶ \$
b	Assets included in Form 990, Part X		· · · · · • \$

	ule D (Form 990) 2020 National Indian				_		41-097		Page 2
Par	rt III Organizations Maintaining	Collections of	Art, His	storical 7	Freasures	, or O	ther Similar A	Assets (C	ontinued)
3	Using the organization's acquisition, accession	n, and other records	, check an	y of the foll	lowing that m	ake sigr	nificant use of its		
	collection items (check all that apply):								
а	Public exhibition		d	Loan d	or exchange	program	IS		
b	Scholarly research		е	Other					
с	Preservation for future generations								
4	Provide a description of the organization's colle	ections and explain	how they f	further the	organization's	s exemp	t purpose in Part		
	XIII.				U U	•			
5	During the year, did the organization solicit or r	receive donations of	f art. histor	rical treasu	res, or other s	similar			
	assets to be sold to raise funds rather than to l							. 🗌 Yes	s ∏No
Par	t IV Escrow and Custodial Arrar			J					
	Complete if the organization a		on Forn	n 990. Pa	art IV. line	9. or r	eported an an	nount on	Form
	990, Part X, line 21.			,	,	- ,	•		
1a	Is the organization an agent, trustee, custodiar	n or other intermedi	ary for con	tributions o	or other asset	s not			
Ĩ			-					🗌 Yes	s ∏No
b	If "Yes," explain the arrangement in Part XIII ar								
b			Juing table				٨٢	nount	
-						1		nouni	
C							-		
d	Additions during the year						-		
e									
f	Ending balance					. [1f			
2a	Did the organization include an amount on For								=
b	If "Yes," explain the arrangement in Part XIII. C	Check here if the exp	planation h	nas been pr	rovided on Pa	art XIII			• 📋
Par	TTV Endowment Funds.			. 000 D.	t. 1) / 15	10			
	Complete if the organization a	answered res	on Forn	1 990, Pa	art IV, line	10.			
		(a) Current year	<b>(b)</b> Pri	ior year	(c) Two years	back	(d) Three years back	(e) Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the current	nt year end balance	(line 1g, c	olumn (a))	held as:				
а	Board designated or quasi-endowment	%							
b	Permanent endowment	)							
с	Term endowment   %								
	The percentages on lines 2a, 2b, and 2c shoul	ld equal 100%.							
3a	Are there endowment funds not in the possess	•	ion that ar	e held and	administered	for the			
	organization by:	5						1	Yes No
								. 3a(i)	
	0							. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizati							. 3b	
4	Describe in Part XIII the intended uses of the c	•							
Par	t VI Land, Buildings, and Equip		VITICITE TURK						
I ui	Complete if the organization a		on Forn	n 990 Pa	art IV line	11a S	See Form 990	Part X li	ne 10
				1					
	Description of property	(a) Cost or oth (investme			r other basis other)	• •	Accumulated epreciation	( <b>d</b> ) Boo	k value
10	Land	(	,	+ "		u			
1a ⊾		· ·							
b	Buildings	· ·							
C	Leasehold improvements	· ·			5,335		5,335		
d	Equipment	••			19,693		19,693		
e	Other			<u> </u>					
Total	. Add lines 1a through 1e. (Column (d) must eq	qual Form 990, Part	X, column	(B), line 10	Эс.)		►		

Schedule D (Form 990) 2020 National Indian Education As	sn	41-0976048 Page 3
Part VII         Investments - Other Securities.           Complete if the organization answered "Yes" on For	m 990 Part IV lin	e 11h See Form 000 Part X line 12
(a) Description of security or category	(b) Book value	(c) Method of valuation:
(including name of security)		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, col. (B) line 12.) • • • • • ▶		
Part VIII Investments - Program Related. Complete if the organization answered "Yes" on For	m 000 Port IV lin	o 11c Soo Form 000 Port X line 13
Complete il the organization answered thes of For	111 990, Fait IV, III 	
(a) Description of investment	<b>(b)</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, col. (B) line 13.) . . . . . . ►

#### 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
(1Security Deposits	9,328
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) • • • • • • • • • • • • • • • • • • •	9,328
Part X Other Liabilities.	

#### 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) Feder	al income taxes	
(2 <b>þ</b> efer	rred Rent	918
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Colun	nn (b) must equal Form 990, Part X, col. (B) line 25.	).▶ 918

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 . . . . .

х

	National Indian Education Assn     4	1-09'	76048 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Re	turn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	1,931,047
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a L	Net unrealized gains (losses) on investments       2a       48,153         Donated services and use of facilities       2b	-	
b	Donated services and use of facilities   2b     Recoveries of prior year grants   2c	-	
С С	Other (Describe in Part XIII.)	-	
d	Add lines 2a through 2d	20	40 150
е 3	Subtract line 2e from line 1	2e 3	48,153
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	5	1,882,894
ā	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	-	
c	Add lines 4a and 4b	4c	5,333
5	Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 12.</i> ).	5	1,888,227
-	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses		Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	, b e.	
1	Total expenses and losses per audited financial statements	1	2,208,696
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	- ·	2,200,090
a	Donated services and use of facilities		
b	Prior year adjustments	-	
c	Other losses		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,208,696
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	2/200/050
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a 5,333		
b	Other (Describe in Part XIII.)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	5,333
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,214,029
Pa	rt XIII Supplemental Information.		_//
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; I	Part X,	line
	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
	Footnote for uncertain tax position under FIN 48 (Part X)		
NIE	A follows the Financial Accounting Standards Board Accounting Standards Codi	fica	tion, which
			· · · · ·
pro	vides guidance on accounting for uncertainty in income taxes recognized in N	IEA'	s financial
sta	tements. NIEA had no unrecognized tax benefits related to uncertain tax post	ions	in its
inf	ormation return that would qualify for either recognition or disclosure in i	ts f	inancial
sta	tements.		
NIE	A's policy would be to recognize interest and penalties on tax positions rel	ated	to its
unr	ecognized tax benefits in income tax expense in the financial statements. Th	roug	<u>h year end, ther</u> e
hav	e been no matters that would have resulted in an accrual for interest and/or	pen	alties.

CHEDULE J Compensation Information		1	OMB No. 1	OMB No. 1545-0047		
(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		hest	20	20		
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 23.	Open to		lic	
epartment of the Treasury ternal Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest inform	ation.	Inspe			
lame of the organization		Employer identification	-		_	
Mational Indian	Education Assn	41-097604	18			
Part I Questio	ns Regarding Compensation				1	
1a Check the appr	opriate box(es) if the organization provided any of the following to or for a p	erson listed on F	orm	Yes	N	
	ection A, line 1a. Complete Part III to provide any relevant information rega					
	r charter travel	•	0.			
Travel for co		•				
=	fication and gross-up payments 🛛 Health or social club dues or initiat					
Discretionar	y spending account Personal services (such as maid, c	hauffeur, chef)				
	es on line 1a are checked, did the organization follow a written policy regain nt or provision of all of the expenses described above? If "No," complete F					
	nt or provision of all of the expenses described above? If No, complete P	antinito	. 1b			
			. 10			
2 Did the organiza	ation require substantiation prior to reimbursing or allowing expenses incurr	ed by all				
-	es, and officers, including the CEO/Executive Director, regarding the items	•				
1a?			. 2			
	if any, of the following the organization used to establish the compensation					
-	EO/Executive Director. Check all that apply. Do not check any boxes for m	-	а			
	tion to establish compensation of the CEO/Executive Director, but explain i	n Part III.				
	on committee					
= .		ation committee				
	other organizations	allon committee				
	did any person listed on Form 990, Part VII, Section A, line 1a, with respect a related organization:	ct to the filing				
•	rance payment or change-of-control payment?		. 4a		x	
<b>b</b> Participate in or	receive payment from a supplemental nonqualified retirement plan?		. 4b		x	
c Participate in or	receive payment from an equity-based compensation arrangement?		. 4c		x	
If "Yes" to any o	f lines 4a-c, list the persons and provide the applicable amounts for each it	em in Part III.				
Only section 5	01(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5	٥				
	ed on Form 990, Part VII, Section A, line 1a, did the organization pay or acc					
•	ontingent on the revenues of:	side any				
	n?		. 5a		x	
•	anization?				x	
, ,	5a or 5b, describe in Part III.					
•	ed on Form 990, Part VII, Section A, line 1a, did the organization pay or ac	crue any				
	ontingent on the net earnings of:					
	n?				X	
		• • • • • • • • • •	. <u>6</u> b		x	
If "Yes" on line 6	a or 6b, describe in Part III.					
7 For persons list	ed on Form 990, Part VII, Section A, line 1a, did the organization provide a	ny nonfixed				
-	escribed on lines 5 and 6? If "Yes," describe in Part III	•	. 7		x	
	nts reported on Form 990, Part VII, paid or accrued pursuant to a contract					
	tract exception described in Regulations section 53.4958-4(a)(3)? If "Yes,"					
			. 8		x	
	3, did the organization also follow the rebuttable presumption procedure de					
Regulations sec	tion 53.4958-6(c)?	<u></u>	. 9			

EEA

### 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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Diana Cournoyer	(i)	135,000	0	0	4,050	20,180	159,230	0
1 Executive Director	(ii)	0	0	0	0	0	0	0
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
1	(ii)							
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							

EEA

41-0976048

## Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Department of the Treasury Internal Revenue Service Name of the organization

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.



41-0976048

#### National Indian Education Assn

#### 01. Members or stockholder classes and rights (Part VI, line 6)

NIEA is a membership organization. Membership dues range from \$80 per year for a basic

membership, \$150 per year for professional membership and \$200 per year for premium

membership. NIEA offers organizational membership ranging from \$2500 to \$25,000; the

benefits include convention registration discounts, subscription to Journal of American

Indian Education, merchandise and webinar discounts, and NIEA Annual Hill Event discount.

#### 02. Member election for additional members (Part VI, line 7a)

Members vote to elect members of the board of directors and for future convention sites

(cities) every year at the annual convention.

#### 03. Governing body decisions (Part VI, line 7b)

The NIEA Board of Directors are made up of twelve American Indians, Alaska Native, and

Native Hawaiians from across the country. General board members serve a 4-year term;

Student board members serve a 2-year term. New board members are elected by popular vote

by NIEA membership, in good standing, during NIEA's Annual Convention.

Any person proposing to revise or amend the NIEA Constitution and By-laws shall be an NIEA

member in good standing. NIEA members in good standing have the option of presenting for

membership consideration any proposed revision or amendment by a petition signed by NIEA

voting members totaling not less than fifty (50) of the NIEA voting membership at least

thirty (30) days prior to the annual convention. Such petition shall be filed with the

NIEA Secretary after which the NIEA Board shall direct that the proposed revision or

amendment be submitted to a vote of the NIEA membership at the annual convention.

#### 04. Form 990 governing body review (Part VI, line 11)

The return was prepared by outside accountants and reviewed by senior management. The For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Name of the organization	Employer identification number
National Indian Education Assn	41-0976048
draft of the 990 form and schedules was provided to the	fiscal committee and to the
president of the board of directors, as well as to the e	executive director. The entire
board received a copy of the 990 before it was filed.	
05. Conflict of interest policy compliance (Part VI, lin	ne 12c)
Each board member annually signs a certificate which aff	irms that he or she: (i) has
received a copy of the policy; (ii) has read and underst	ands the policy; (iii) has agreed
to comply with the policy; and, (iv) understands that NI	EA is a not-for-profit
organization and that in order to maintain its federal t	ax exemption it must engage
primarily in activities which are consistent with its ta	x-exempt purpose. After disclosure

of the actual or possible conflict of interest, the president brings the conflict to the

executive committee who will discuss and act on the issue. If the board member is also a

member of the executive committee, he or she must recuse him or herself from this

discussion. If the executive committee determines that a conflict of interest exists, or

may exist, it is the prerogative of the executive committee to decide on appropriate

actions. These determinations may include mere notification of the entire board, recusal

from decision making on the matter at hand, or resignation from that part of NIEA's

governance structure where the conflict exists. The affected board member is bound by the

decision of the executive committee. Any doubt regarding whether a conflict of interest

exists will be resolved in favor of disclosure, abstention and absence. The same conflict

of interest policy applies to board of directors and employees.

#### 06. CEO, executive director, top management comp (Part VI, line 15a)

The compensation of the executive director is reviewed by the executive committee of the board of directors, utilizing input from the accounting consultant, salary surveys, historic information and information obtained from review of available public copies of the 990's of other nonprofit organizations. The decision and procedure is documented in the committee meeting minutes. This procedure was last completed in February 2019.

#### 07. Governing documents, etc, available to public (Part VI, line 19)

NIEA makes its IRS Form 990, by-laws and constitution available on its website. The

conflict of interest policy and financial statements are available upon request.

#### 08. List of other fees for services expenses (Part IX, line 11g)

Education Reform Support - \$585,286

Convention \$69,875

<u>Other \$2,500</u>

#### 09. General explanation attachment

Mission Statement: The National Indian Education Association advances comprehensive,

culture-based educational opportunities for American Indians, Alaska Natives, and Native

Hawaiians. Our traditional Native cultures and values are the foundations of our learning

therefore, NIEA will: Promote educational sovereignty; Support continuing use of

traditional knowledge and language; and Improve educational opportunities and results in

our communities. The organization supports tribes and communities in developing capacity

to administer excellent education programs by promoting culture-based education models

which strengthens languages and preserve traditional practices of their communities.