Return of Organization Exempt From Income Tax

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

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

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

**PUBLIC DISCLOSURE COPY**

Form 990
Department of the Treasury
Internal Revenue Service

A For the 2020 calendar year, or tax year beginning JUL 22, 2020 and ending JUN 30, 2021

B Check if applicable:

- [X] Address change
- [X] Name change
- Final return/terminated
- Amended return
- Application pending

C Name of organization

REI COOPERATIVE ACTION FUND

D Employer identification number

85-4299419

E Telephone number

425-300-4897

G Gross receipts $1,772,720.

H(a) Is this a group return

- [X] Yes
- No

H(b) Are all subordinates included?

- [X] Yes
- No

I Tax-exempt status:

- [X] 501(c)(3)
- [ ] 501(c)( )

- [ ] (insert no.)

- [X] 4947(a)(1) or

- [ ] 527

J Website:

N/A

K Form of organization:

- [X] Corporation
- [ ] Trust
- [ ] Association
- Other

L Year of formation:

2020

M State of legal domicile: WA

Part I Summary

1 Briefly describe the organization’s mission or most significant activities: SEE SCHEDULE O

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, Part I, line 11

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

16b Total fundraising expenses (Part IX, column (D), line 25)

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Part II Signature Block

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

Sign Here

- Signature of officer
- Type or print name and title

Rick Palmer, Treasurer

Date

05/10/2022

Print/Type preparer’s name

Preparer’s signature

Date

05/09/22

Check [ ] self-employed

PTIN

P00746598

Preparer’s EIN

91-1194016

Phone no. 425-454-4919

May the IRS discuss this return with the preparer shown above? See instructions

[ ] Yes
[ ] No

Form 990 (2020)
Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization’s mission:

THE REI COOPERATIVE ACTION FUND ("RCAF") DIRECTLY SUPPORTS ORGANIZATIONS PROMOTING JUSTICE, EQUITY AND BELONGING IN THE OUTDOORS TO STRENGTHEN THE HEALTH AND WELL-BEING OF PEOPLE AND COMMUNITIES. WE BELIEVE THAT TIME OUTSIDE AND OUR CONNECTION TO NATURE IS FUNDAMENTAL.

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 [X] 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 [X] No

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

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

4a (Code: ______ ) (Expenses $ 306,797. including grants of $ 287,464. ) (Revenue $ 0. )
CONNECTING PEOPLE OUTSIDE-SUPPORTING ORGANIZATIONS LED BY AND SERVING BLACK COMMUNITIES; INDIGENOUS PEOPLES; PEOPLE OF COLOR; LGBTQ+ COMMUNITY; PEOPLE WITH PHYSICAL DISABILITIES; AND WOMEN THROUGH CONNECTIONS TO THE OUTDOORS. PRIORITIZING ORGANIZATIONS THAT ARE LEVERAGING THE OUTDOORS AS A TOOL FOR EQUITY, HEALING AND JOY, SOCIAL JUSTICE, CIVIC ACTION, YOUTH DEVELOPMENT, OR CREATIVITY.

4b (Code: ______ ) (Expenses $ 379,333. including grants of $ 360,000. ) (Revenue $ 0. )
CREATING SPACE OUTSIDE-INCREASING EQUITABLE ACCESS TO OUTDOOR SPACES AND RECREATION OPPORTUNITIES (PARKS, TRAILS, OPEN SPACES, WATERWAYS). PRIORITIZING COMMUNITY-LED AND NATURAL CLIMATE SOLUTIONS THAT BRING NATURE'S INDIVIDUAL AND ENVIRONMENTAL BENEFITS CLOSER TO HOME FOR MARGINALIZED COMMUNITIES.

4c (Code: ______ ) (Expenses $ 19,334. including grants of $ 0. ) (Revenue $ 0. )
CENTERING HEALTH OUTSIDE-INVESTING, STRENGTHENING, AND AMPLIFYING SCIENTIFIC RESEARCH AND SUPPORTING TRADITIONAL ECOLOGICAL KNOWLEDGE THAT DEMONSTRATES TIME SPENT OUTSIDE IMPROVES MENTAL, PHYSICAL, AND EMOTIONAL HEALTH, AS WELL AS RESILIENCE FOR PEOPLE AND COMMUNITIES.

4d Other program services (Describe on Schedule O.)

(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses ➤ $ 705,464.
**Part IV Checklist of Required Schedules**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>X</td>
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<tr>
<td>2</td>
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<td>3</td>
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<td>10</td>
<td>X</td>
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<tr>
<td>11</td>
<td>X</td>
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</tbody>
</table>

**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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Did the organization report an amount in Part X, line 25?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Did the organization maintain a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
**Checklist of Required Schedules (continued)**

**Part IV**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>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?</td>
<td>22</td>
</tr>
<tr>
<td>23</td>
<td>Did the organization answer &quot;Yes&quot; to Part VII, Section A, line 3, 4, or 5 about compensation of the organization’s current and former officers, directors, trustees, key employees, and highest compensated employees? If &quot;Yes,&quot; complete Schedule J</td>
<td>23</td>
</tr>
<tr>
<td>24a</td>
<td>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 &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a</td>
<td>24a</td>
</tr>
<tr>
<td>24b</td>
<td>Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td>24b</td>
</tr>
<tr>
<td>24c</td>
<td>Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td>24c</td>
</tr>
<tr>
<td>24d</td>
<td>Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td>24d</td>
</tr>
<tr>
<td>25a</td>
<td><strong>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</strong> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If &quot;Yes,&quot; complete Schedule L, Part I</td>
<td>25a</td>
</tr>
<tr>
<td>25b</td>
<td>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 &quot;Yes,&quot; complete Schedule L, Part I</td>
<td>25b</td>
</tr>
<tr>
<td>26</td>
<td>Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If &quot;Yes,&quot; complete Schedule L, Part II</td>
<td>26</td>
</tr>
<tr>
<td>27</td>
<td>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 &quot;Yes,&quot; complete Schedule L, Part III</td>
<td>27</td>
</tr>
<tr>
<td>28</td>
<td>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):</td>
<td>28</td>
</tr>
<tr>
<td>a</td>
<td>A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28a</td>
</tr>
<tr>
<td>b</td>
<td>A family member of any individual described in line 28a? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28b</td>
</tr>
<tr>
<td>c</td>
<td>A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28c</td>
</tr>
<tr>
<td>29</td>
<td>Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td>29</td>
</tr>
<tr>
<td>30</td>
<td>Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I</td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II</td>
<td>32</td>
</tr>
<tr>
<td>33</td>
<td>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 &quot;Yes,&quot; complete Schedule R, Part I</td>
<td>33</td>
</tr>
<tr>
<td>34</td>
<td>Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1</td>
<td>34</td>
</tr>
<tr>
<td>35a</td>
<td>Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td>35a</td>
</tr>
<tr>
<td>35b</td>
<td>If &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td>35b</td>
</tr>
<tr>
<td>36</td>
<td><strong>Section 501(c)(3) organizations.</strong> Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td>36</td>
</tr>
<tr>
<td>37</td>
<td>Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If &quot;Yes,&quot; complete Schedule R, Part VI</td>
<td>37</td>
</tr>
<tr>
<td>38</td>
<td>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td>38</td>
</tr>
</tbody>
</table>

**Note:** All Form 990 filers are required to complete Schedule O

**Part V**

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

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable</td>
<td>1a</td>
<td>0</td>
</tr>
<tr>
<td>b Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable</td>
<td>1b</td>
<td>0</td>
</tr>
<tr>
<td>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td>1c</td>
<td></td>
</tr>
</tbody>
</table>

032004 12-23-20
### Part V: Statements Regarding Other IRS Filings and Tax Compliance

#### 2a
Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  
If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  
*Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)*

#### 3a
Did the organization have unrelated business gross income of $1,000 or more during the year?  
If "Yes," has it filed a Form 990-T for this year?  
*Note: If "No" to line 3b, provide an explanation on Schedule O*

#### 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)?  
If "Yes," enter the name of the foreign country

### 5a
Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  
If "Yes," did the organization notify the donor of the value of the goods or services provided?  
*Note: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).*

### 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?  
If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  
*Note: Section 501(c)(12) organizations.

### 7a
Organizations that may receive deductible contributions under section 170(c).  
Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?  
If "Yes," did the organization notify the donor of the value of the goods or services provided?

### 8a
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?  
*Note: See the instructions for additional information the organization must report on Schedule O.*

### 9a
Sponsoring organizations maintaining donor advised funds.  
Did the sponsoring organization make any taxable distributions under section 4966?  
If the sponsoring organization make a distribution to a donor, donor advisor, or related person?

### 10a
Section 501(c)(7) organizations.  
Initiation fees and capital contributions included on Part VIII, line 12  
Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

### 11a
Section 501(c)(12) organizations.  
Gross income from members or shareholders  
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?  
If "Yes," enter the amount of tax-exempt interest received or accrued during the year

### 13a
Section 501(c)(29) qualified nonprofit health insurance issuers.  
Is the organization licensed to issue qualified health plans in more than one state?  
*Note: See the instructions for additional information the organization must report on Schedule O.*

### 14a
Did the organization receive any payments for indoor tanning services during the tax year?  
If "Yes," has it filed a Form 720 to report these payments?  
*Note: If "No," provide an explanation on Schedule O*

### 15a
Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?  
If "Yes," see instructions and file Form 4720, Schedule N.

### 16a
Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  
If "Yes," complete Form 4720, Schedule O.
Part VI  Governance, Management, and Disclosure  For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Section A. Governing Body and Management

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.

1b Enter the number of voting members included on 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?

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Did the organization have members or stockholders?

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?

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

8a The governing body?

8b Each committee with authority to act on behalf of the governing body?

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

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

10a Did the organization have local chapters, branches, or affiliates?

10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

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?

15a The organization's CEO, Executive Director, or top management official

15b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed  

NONE

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website  ☐ Another's website  ☑ Upon request  ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records  

RICK PALMER  –  425-300-4897

PO BOX 1938, SUMNER, WA  98390-0800
### Part VII: Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 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.

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

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) MARC BEREJKA</td>
<td>20.00 X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>PRESIDENT</td>
<td>20.00 X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(2) KRISTEN RAGAIN</td>
<td>30.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>VICE PRESIDENT</td>
<td>10.00 X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(3) RICK PALMER</td>
<td>5.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TREASURER</td>
<td>35.00 X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(4) WILMA WALLACE</td>
<td>5.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SECRETARY/GENERAL COUNSEL</td>
<td>35.00 X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(5) ERIC ARTZ</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>39.00 X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(6) SHARON PHILPOTT</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1b Subtotal</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Total from continuation sheets to Part VII, Section A</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Total (add lines 1b and 1c)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes, complete Schedule J for such individual"

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes, complete Schedule J for such individual"

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes, complete Schedule J for such person"

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

### Section B. Independent Contractors

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

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

**Part VIII**

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td>$1,772,720.</td>
</tr>
<tr>
<td>e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
<td>$1,772,720.</td>
</tr>
</tbody>
</table>

### Program Service Revenue

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
</tr>
<tr>
<td>f All other program service revenue</td>
<td></td>
</tr>
<tr>
<td>g Total. Add lines 2a-2f</td>
<td></td>
</tr>
</tbody>
</table>

### Other Revenue

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
</tr>
<tr>
<td>6 a Gross rents</td>
<td></td>
</tr>
<tr>
<td>b Less: rental expenses</td>
<td></td>
</tr>
<tr>
<td>c Rental income or (loss)</td>
<td></td>
</tr>
<tr>
<td>d Net rental income or (loss)</td>
<td></td>
</tr>
<tr>
<td>7 a Gross amount from sales of assets other than inventory</td>
<td></td>
</tr>
<tr>
<td>b Less: cost or other basis and sales expenses</td>
<td></td>
</tr>
<tr>
<td>c Gain or (loss)</td>
<td></td>
</tr>
<tr>
<td>d Net gain or (loss)</td>
<td></td>
</tr>
<tr>
<td>8 a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18</td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from fundraising events</td>
<td></td>
</tr>
<tr>
<td>9 a Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from gaming activities</td>
<td></td>
</tr>
<tr>
<td>10 a Gross sales of inventory, less returns and allowances</td>
<td></td>
</tr>
<tr>
<td>b Less: cost of goods sold</td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from sales of inventory</td>
<td></td>
</tr>
</tbody>
</table>

### Miscellaneous Revenue

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
</tr>
<tr>
<td>d All other revenue</td>
<td></td>
</tr>
<tr>
<td>e Total. Add lines 11a-11d</td>
<td></td>
</tr>
<tr>
<td>12 Total revenue. See instructions</td>
<td></td>
</tr>
</tbody>
</table>

| | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| | $1,772,720. | 0. | 0. | 0. |

---

Noncash contributions included in lines 1a-1f

032009 12-23-20
<table>
<thead>
<tr>
<th></th>
<th>Total expenses</th>
<th>Program service expenses</th>
<th>Management and general expenses</th>
<th>Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>647,464</td>
<td>647,464</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td>5,925</td>
<td></td>
<td>5,925</td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>63,727</td>
<td>58,000</td>
<td>5,727</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>28,102</td>
<td></td>
<td>28,102</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>745,218</td>
<td>705,464</td>
<td>5,727</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part X
#### Balance Sheet

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>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</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>9</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>10a</td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>10b</td>
</tr>
<tr>
<td>10c</td>
<td></td>
<td>10c</td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td>11</td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td>12</td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td>13</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td>14</td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>15</td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>16</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>17</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>18</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>19</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>20</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>21</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td>22</td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>24</td>
</tr>
<tr>
<td>25</td>
<td>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</td>
<td>25</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>26</td>
</tr>
<tr>
<td>27</td>
<td>Net assets without donor restrictions</td>
<td>27</td>
</tr>
<tr>
<td>28</td>
<td>Net assets with donor restrictions</td>
<td>28</td>
</tr>
<tr>
<td>29</td>
<td>Capital stock or trust principal, or current funds</td>
<td>29</td>
</tr>
<tr>
<td>30</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Total net assets or fund balances</td>
<td>32</td>
</tr>
<tr>
<td>33</td>
<td>Total liabilities and net assets/fund balances</td>
<td>33</td>
</tr>
</tbody>
</table>

Form 990 (2020)

**REI COOPERATIVE ACTION FUND**

85-4299419

Balance Sheet Part X

Form 990 (2020)
**Part XI | Reconciliation of Net Assets**

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>9</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>10</td>
</tr>
</tbody>
</table>

**Part XII | Financial Statements and Reporting**

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: [ ] Cash [x] Accrual [ ] Other</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; 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:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[ ] Separate basis [x] Consolidated basis [ ] Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[ ] Separate basis [x] Consolidated basis [ ] Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; 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?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td>3a</td>
</tr>
<tr>
<td></td>
<td>[ ] Yes [x] No</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; 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</td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2020)
### SCHEDULE A (Form 990 or 990-EZ) 2020

**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. [Attach to Form 990 or Form 990-EZ.](https://www.irs.gov/Form990)

Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for instructions and the latest information.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>REI COOPERATIVE ACTION FUND</td>
<td>85-4299419</td>
</tr>
</tbody>
</table>

#### Part I

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

- The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)
  - [ ] A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
  - [ ] A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
  - [ ] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
  - [ ] A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
  - [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
  - [ ] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
  - X [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
  - [ ] A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
  - [ ] An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
  - [ ] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
  - [ ] An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
  - [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
    - [ ] Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
    - [ ] Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
    - [ ] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
    - [ ] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - [ ] Enter the number of supported organizations
  - [ ] Provide the following information about the supported organization(s):

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total

---

**LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.** 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020
### Part II: Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1,772,720</td>
<td>1,772,720</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,772,720</td>
<td>1,772,720</td>
</tr>
</tbody>
</table>

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 Public support, Subtract line 5 from line 4.

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,772,720</td>
<td>1,772,720</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,772,720</td>
<td>1,772,720</td>
</tr>
</tbody>
</table>

12 Gross receipts from related activities, etc. (see instructions) 12

13 First 5 years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

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

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) 14 %

15 Public support percentage from 2019 Schedule A, Part II, line 14 15 %

16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

16b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

17a 10% - facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.

17b 10% - facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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**REI COOPERATIVE ACTION FUND**

85-4299419

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**Schedule A (Form 990 or 990-EZ) 2020**
### Part III Support 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.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First 5 years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))</td>
<td>15 %</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Public support percentage from 2019 Schedule A, Part III, line 15</td>
<td>16 %</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))</td>
<td>17 %</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Investment income percentage from 2019 Schedule A, Part III, line 17</td>
<td>18 %</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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

1. Are all of the organization’s supported organizations listed by name in the organization’s governing documents? *Yes,* describe in Part VI how the supported organizations are designated. If designated by 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)? *Yes,* explain in Part VI how the organization determined that the supported 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)? *Yes,* answer lines 3b and 3c below.

   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)? *Yes,* describe in Part VI when and how the 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? *Yes,* explain in Part VI what controls the organization put in place to ensure such use.

4a. Was any supported organization not organized in the United States (“foreign supported organization”)? *Yes,* and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.

   b. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *Yes,* describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.

   c. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *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.

5a. Did the organization add, substitute, or remove any supported organizations during the tax year? *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).

   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?

   c. Substitutions only. Was the substitution the result of an event beyond the organization’s control?

6. Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 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? *Yes,* provide detail in Part VI.

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? *Yes,* complete Part I of Schedule L (Form 990 or 990-EZ).

8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *Yes,* complete Part I of Schedule L (Form 990 or 990-EZ).

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))? *Yes,* provide detail in Part VI.

   b. Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *Yes,* provide detail in Part VI.

   c. Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *Yes,* provide detail in Part VI.

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)? *Yes,* answer line 10b below.

   b. Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)
### Part IV: Supporting Organizations (continued)

#### Section B. Type I Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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(s)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Type II Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Were a majority of the organization’s directors or trustees during the tax year also a majority of the directors or trustees of each of the organization’s supported organization(s)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The organization satisfied the Activities Test. Complete line 2 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. The organization is the parent of each of its supported organizations. Complete line 3 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Activities Test. Answer lines 2a and 2b below.</td>
<td></td>
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</tr>
<tr>
<td>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?</td>
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<td></td>
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<tr>
<td>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?</td>
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</tr>
<tr>
<td>3. Parent of Supported Organizations. Answer lines 3a and 3b below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
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<td></td>
</tr>
<tr>
<td>b. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations?</td>
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</tbody>
</table>
Part VI
See instructions.

Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td>Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td>Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by 0.035.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 0.85 of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td>Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
</tbody>
</table>

7 | Check here if the current year is the organization’s first as a non-functionally integrated Type III supporting organization (see instructions). | |
### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

#### Section D - Distributions

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2020 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2020</th>
<th>(iii) Distributable Amount for 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2020 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2020</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a From 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b From 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c From 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d From 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e From 2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f Total of lines 3a through 3e</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>h Applied to 2020 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>i Carryover from 2015 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2020 from Section D, line 7:</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>a Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Applied to 2020 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Remainder. Subtract lines 4a and 4b from line 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2021. Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Excess from 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Excess from 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Excess from 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Excess from 2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Excess from 2020</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**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, 2b, 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 E, lines 2, 5, and 6. Also complete this part for any additional information.

(See instructions.)

**PART II, COLUMN E**

** Public Disclosure Copy **

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

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

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

Name of the organization

**REI COOPERATIVE ACTION FUND**

Employer identification number

85-4299419

---

**Organization type** (check one):

**X** Form 990 or 990-EZ

- **X** 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust not treated as a private foundation
- 527 political organization

**Box** Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

---

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

**General Rule**

- **X** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of
  - (1) $5,000; or
  - (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year.

---

**Caution:** An organization that isn’t covered by the General Rule and/or the Special Rules doesn’t file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn’t meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
## Part I Contributors
(see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$1,122,720</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$650,000</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td>Person X Payroll</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
### Part II Noncash Property

(see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions.)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.)

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
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<td>(e) Transfer of gift</td>
<td>Transferee’s name, address, and ZIP + 4</td>
<td>Relationship of transferor to transferee</td>
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<td>(a) No. from Part I</td>
<td>(b) Purpose of gift</td>
<td>(c) Use of gift</td>
<td>(d) Description of how gift is held</td>
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<td>(e) Transfer of gift</td>
<td>Transferee’s name, address, and ZIP + 4</td>
<td>Relationship of transferor to transferee</td>
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<td>(a) No. from Part I</td>
<td>(b) Purpose of gift</td>
<td>(c) Use of gift</td>
<td>(d) Description of how gift is held</td>
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<td>Transferee’s name, address, and ZIP + 4</td>
<td>Relationship of transferor to transferee</td>
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<td>(a) No. from Part I</td>
<td>(b) Purpose of gift</td>
<td>(c) Use of gift</td>
<td>(d) Description of how gift is held</td>
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<tr>
<td>(e) Transfer of gift</td>
<td>Transferee’s name, address, and ZIP + 4</td>
<td>Relationship of transferor to transferee</td>
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</table>
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

#### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [x] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>BLACK GIRLS RUN! FOUNDATION</td>
<td>83-0866322</td>
<td>501(C)(3)</td>
<td>33,600.</td>
<td>0.</td>
<td>GENERAL SUPPORT</td>
<td></td>
<td>GENERAL SUPPORT</td>
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<tr>
<td>8223 PILGRIM TERRACE</td>
<td>RICHMOND, VA 23227</td>
<td></td>
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<tr>
<td>ADAPTIVE ADVENTURES</td>
<td>84-1512653</td>
<td>501(C)(3)</td>
<td>67,120.</td>
<td>0.</td>
<td>GENERAL SUPPORT</td>
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<tr>
<td>9053 HARLAN STREET SUITE 34</td>
<td>WESTMINSTER, CO 80031</td>
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<tr>
<td>CNATURENET, DBA CHILDREN &amp; NATURE NETWORK - 1611 COUNTY RD B WEST</td>
<td>14-1959018</td>
<td>501(C)(3)</td>
<td>50,000.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>STE 315 - ROSEVILLE, MN 55113</td>
<td>OUTDOOR AFRO</td>
<td>2323 BROADWAY</td>
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<tr>
<td>OAKLAND, CA 94612</td>
<td>47-3094045</td>
<td>501(C)(3)</td>
<td>31,888.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>GIRL TREK INCORPORATED</td>
<td>1800 WYOMING AVE, NW</td>
<td>06-1811886</td>
<td>501(C)(3)</td>
<td>31,888.</td>
<td>0.</td>
<td>GENERAL SUPPORT</td>
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<tr>
<td>WASHINGTON, DC 20009</td>
<td>COMMUNITY INITIATIVES (FISCAL SPONSOR FOR LATINO OUTDOORS) - 1000 BROADWAY, SUITE 480 - OAKLAND, CA 94607</td>
<td>94-3255070</td>
<td>501(C)(3)</td>
<td>41,080.</td>
<td>0.</td>
<td>GENERAL SUPPORT</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ........................................... 13

3. Enter total number of other organizations listed in the line 1 table ........................................... 0

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE VENTURE OUT PROJECT 48 WARD AVE</td>
<td>47-1999271</td>
<td>501(C)(3)</td>
<td>31,888.00</td>
<td>0.00</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>FRIENDS OF BIG MARSH 1000 W. FULTON MARKET #4</td>
<td>47-3175104</td>
<td>501(C)(3)</td>
<td>50,000.00</td>
<td>0.00</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>SAN FRANCISCO PARKS ALLIANCE 1074 FOLSOM STREET</td>
<td>23-7131784</td>
<td>501(C)(3)</td>
<td>50,000.00</td>
<td>0.00</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>EAST COAST GREENWAY ALLIANCE 5826 FAYETTEVILLE ROAD SUITE 210</td>
<td>04-3326812</td>
<td>501(C)(3)</td>
<td>80,000.00</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>FRIENDS OF THE LOS ANGELES RIVER 570 WEST AVENUE 26 SUITE 250</td>
<td>95-4171497</td>
<td>501(C)(3)</td>
<td>50,000.00</td>
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<td>GREAT RIVER PASSAGE CONSERVANCY PO BOX 4974</td>
<td>83-2828394</td>
<td>501(C)(3)</td>
<td>50,000.00</td>
<td>0.00</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>WASHINGTON AREA BICYCLIST ASSOCIATION - 2599 ONTARIO RD NW - WASHINGTON, DC 20009</td>
<td>23-7305477</td>
<td>501(C)(3)</td>
<td>80,000.00</td>
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<td>GENERAL SUPPORT</td>
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</table>
### Part III: Grants and Other Assistance to Domestic Individuals

Complete if the organization answered “Yes” on Form 990, Part IV, line 22.

**Part III can be duplicated if additional space is needed.**

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
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</table>

### Part IV: Supplemental Information

Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

ALL GRANTEES ARE CHECKED FOR VALID 501(C)(3) STATUS. IF THEY DO NOT HAVE

THIS STATUS THEY USE A FISCAL SPONSOR. GRANTEES SIGN A GRANT AGREEMENT THAT

IS STORED IN OUR FOUNDANT GRANTMAKING DATABASE. GRANTEES SEND APPLICATIONS

AND ARE SCREENED TO ENSURE THEIR MISSION AND PROGRAMS ALIGN WELL WITH THE

RCAF MISSION.
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO SUPPORT ORGANIZATIONS PROMOTING JUSTICE, EQUITY AND BELONGING IN THE
OUTDOORS TO STRENGTHEN THE HEALTH AND WELL-BEING OF PEOPLE AND
COMMUNITIES.

PART I, LINE 6

THIS NUMBER IS BASED ON THE AMOUNT OF RECREATIONAL EQUIPMENT, INC. (A RELATED ORGANIZATION) EMPLOYEES THAT ARE VOLUNTEERING THEIR TIME TO RCAF. THE SERVICES PROVIDED WERE LEGAL, ACCOUNTING, TREASURY, IT, ETC.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOR THE SOCIAL, CULTURAL, ECONOMIC AND INDIVIDUAL HEALTH AND WELL-BEING OF ALL PEOPLE. BUT TODAY, MILLIONS OF AMERICANS LACK ACCESS TO NATURE AND THRIVING OUTDOOR SPACES. IN ADDITION TO THIS, MANY PEOPLE DO NOT FEEL A SENSE OF SAFETY OR BELONGING IN THE OUTDOORS. THESE ISSUES STEM FROM LEGACIES AND SYSTEMS OF INEQUITY, INJUSTICE, AND RACISM. TO CATALYZE THIS WORK, THE REI COOPERATIVE ACTION FUND WILL INTENTIONALLY FOCUS ON MARGINALIZED GROUPS. IT IS THESE VERY GROUPS WHO ARE LEADING THE WAY IN ADDRESSING BARRIERS AND CREATING NEWFOUND OPPORTUNITIES TO EVOKE JOY, WELL-BEING AND BELONGING OUTSIDE, RESULTING IN IMPROVED HEALTH AND WELL-BEING FOR PEOPLE, COMMUNITIES, AND OUR PLANET.

FORM 990, PART VI, SECTION A, LINE 2:

ERIC ARTZ HAS A BUSINESS RELATIONSHIP WITH SHARON PHILPOTT, MARC BEREJKA, KRISTEN RAGAIN, RICK PALMER, AND WILMA WALLACE.
FORM 990, PART VI, SECTION A, LINE 6:

THE SOLE MEMBER OF THE CORPORATION SHALL BE RECREATIONAL EQUIPMENT, INC.

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

THE SOLE MEMBER SHALL HAVE THE RIGHT TO ADMIT NEW MEMBERS OR TO ELECT THE

DIRECTORS OF THE ORGANIZATION.

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

EACH MEMBER SHALL BE ENTITLED TO ONE VOTE ON EACH MATTER SUBMITTED TO A

VOTE OF MEMBERS. MEMBERS SHALL HAVE THE RIGHT (A) TO ADMIT NEW MEMBERS, (B) TO ELECT THE

DIRECTORS OF THE CORPORATION, (C) TO AMEND OR RESTATE THE

ARTICLES OF INCORPORATION OR BYLAWS OF THE CORPORATION, (D) TO APPROVE THE

SALE OF ALL OR SUBSTANTIALLY ALL OF THE ASSETS OF THE CORPORATION, (E) TO

APPROVE THE VOLUNTARY DISSOLUTION OF THE CORPORATION AND (F) TO VOTE ON ANY

OTHER MATTERS ON WHICH THE APPROVAL OR VOTE OF MEMBERS IS REQUIRED BY THESE

BYLAWS OR APPLICABLE WASHINGTON LAW.

FORM 990, PART VI, SECTION A, LINE 8B:

DUE TO THE SIZE OF THE ORGANIZATION AND THE BOARD, COMMITTEES ARE NOT

DEEMED NECESSARY.

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

THE ORGANIZATION TREASURER WILL CONDUCT THE MAIN REVIEW OF THE FORM 990 AND

WILL ROUTE TO THE FULL GOVERNING BODY FOR APPROVAL BEFORE BEING FILED.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION’S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.
**Part I**  Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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<tbody>
<tr>
<td>(a) Name, address, and EIN (if applicable) of disregarded entity</td>
<td>(b) Primary activity</td>
<td>(c) Legal domicile (state or foreign country)</td>
<td>(d) Total income</td>
<td>(e) End-of-year assets</td>
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**Part II**  Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

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<tbody>
<tr>
<td>(a) Name, address, and EIN of related organization</td>
<td>(b) Primary activity</td>
<td>(c) Legal domicile (state or foreign country)</td>
<td>(d) Exempt Code section</td>
<td>(e) Public charity status (if section 501(c)(3))</td>
<td>(f) Direct controlling entity</td>
<td>(g) Section 512(b)(13) controlled entity?</td>
<td></td>
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<tr>
<td>THE REI FOUNDATION - 91-1577992</td>
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<td>Yes</td>
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<tr>
<td>P.O. BOX 1938</td>
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<td>No</td>
<td>X</td>
</tr>
<tr>
<td>SUMNER, WA 98390</td>
<td>GRANTMAKING</td>
<td>WASHINGTON</td>
<td>501(c)(3)</td>
<td>PF</td>
<td>N/A</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III
**Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
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<tbody>
<tr>
<td>RECREATIONAL EQUIPMENT, INC.</td>
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<td>Yes</td>
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<tr>
<td>1700 45TH ST E</td>
<td>RETAILER OF OUTDOOR</td>
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<tr>
<td>SUMNER, WA 98352</td>
<td>EQUIPMENT &amp; SERVICES</td>
<td>WA</td>
<td>N/A</td>
<td>C CORP</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
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</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>RECREATIONAL EQUIPMENT, INC.</td>
<td></td>
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<td>RETAILER OF OUTDOOR</td>
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</tbody>
</table>

032162 10-28-20
### Part V  Transactions With Related Organizations.

Complete if the organization answered “Yes” on Form 990, Part IV, line 34, 35b, or 36.

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

1. **During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**
   - Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
   - Gift, grant, or capital contribution to related organization(s)
   - Gift, grant, or capital contribution from related organization(s)
   - Loans or loan guarantees to or for related organization(s)
   - Loans or loan guarantees by related organization(s)
   - Dividends from related organization(s)
   - Sale of assets to related organization(s)
   - Purchase of assets from related organization(s)
   - Exchange of assets with related organization(s)
   - Lease of facilities, equipment, or other assets to related organization(s)
   - Lease of facilities, equipment, or other assets from related organization(s)
   - Performance of services or membership or fundraising solicitations for related organization(s)
   - Performance of services or membership or fundraising solicitations by related organization(s)
   - Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   - Sharing of paid employees with related organization(s)
   - Reimbursement paid to related organization(s) for expenses
   - Reimbursement paid by related organization(s) for expenses
   - Other transfer of cash or property to related organization(s)
   - Other transfer of cash or property from related organization(s)

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

#### (a) Name of related organization

#### (b) Transaction type (a-s)

#### (c) Amount involved

#### (d) Method of determining amount involved

| (1) |  |
| (2) |  |
| (3) |  |
| (4) |  |
| (5) |  |
| (6) |  |
Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners sec. 501(c)(3) orgs.?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
</table>
Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.