

Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

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.

A For the 2017 calendar year, or tax year beginning 07/01, 2017, and ending 06/30, 2018

Form header section containing organization name (HAMPTON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.), EIN (54-0843118), address (5200 HAMPTON BOULEVARD, NORFOLK, VA 23508-1507), principal officer (BERTEL SCHMIDT), and tax-exempt status (501(c)(3)).

Part I Summary

Summary table with columns for Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, member counts, revenue breakdown (Total revenue: 13,346,087), expenses breakdown (Total expenses: 13,951,110), and net assets (Total assets: 21,459,942).

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.

Signature block for officer BERTEL SCHMIDT, PRESIDENT & CEO, dated 10/30/2018.

Paid Preparer Use Only section for JAMES E PRINCE III, Preparer's signature, firm name BDO USA, LLP, and firm address.

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes

For Paperwork Reduction Act Notice, see the separate instructions.

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:

ATTACHMENT 1

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

[] 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

[] 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 \$ 6,970,463. including grants of \$) (Revenue \$)

ATTACHMENT 2

4b (Code:) (Expenses \$ 1,135,231. including grants of \$) (Revenue \$)

ENGINEERING AND TECHNOLOGY - SERVING THE NEEDS OF THE COMMUNITY, PROVIDING INTERNET ACCESS TO SCHOOLS AND STUDENTS, AND TELECOMMUNICATIONS FOR CELL PHONE COMPANIES 24/7, 365 DAYS. PROVIDES TECHNOLOGY SERVICES TO THE INTERNAL STAFF AND PLATFORMS FOR STREAMING SERVICES. PROVIDES MAINTENANCE, REPAIR AND ENGINEERING SERVICES FOR TELEVISION AND RADIO STUDIOS AND OUR TRANSMITTERS LOCATED THROUGHOUT SOUTHEASTERN VIRGINIA.

4c (Code:) (Expenses \$ 2,494,070. including grants of \$) (Revenue \$)

EDUCATION - HRETA, INC., OWNED BY 19 VIRGINIA SCHOOL DIVISIONS, DELIVERS EARLY LEARNING, TEACHER TRAINING, AND ONLINE CONTENT CREATION AND DISTRIBUTION SERVICES, INCLUDING 24 ONLINE HIGH SCHOOL EDUCATION COURSES CORRELATED TO THE VIRGINIA STANDARDS OF LEARNING, AND A DIGITAL ASSET LIBRARY OF OVER 154,000 RICH MEDIA ELEMENTS PROVIDED TO OVER 100,000 REGISTERED PUBLIC, PRIVATE AND HOME SCHOOL TEACHERS AND STUDENTS, AND ALL SCHOOL DIVISIONS IN THE STATE. WE ALSO PROVIDE ONLINE HIGH SCHOOL AND COLLEGE DUAL CREDIT ADVANCED PLACEMENT COURSES, OFFERED THROUGH VIRTUAL VIRGINIA, A SERVICE OF THE VIRGINIA DEPARTMENT OF EDUCATION.

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

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

4e Total program service expenses 10,599,764.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 1a through 14b regarding IRS filings and tax compliance.

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 in Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (35), 1b (34), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed VA,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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.
19 Describe in 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: TOM MOREHOUSE 5200 HAMPTON BOULEVARD NORFOLK, VA 23508 757-889-9400

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BERTEL SCHMIDT PRESIDENT & CEO	40.00 0.	X		X				231,490.	0.	16,509.
(2) LIST OF DIRECTORS ATTACHED DIRECTORS	0. 0.	X						0.	0.	0.
(3) THOMAS MOREHOUSE CHIEF FINANCIAL OFFICER	40.00 0.			X				127,139.	0.	4,396.
(4) VIRGINIA WERNER ASSISTANT SECRETARY	40.00 0.			X				60,508.	0.	1,976.
(5) DIANE ROGIC DIRECTOR OF CORPORATE SUPPORT	40.00 0.					X		166,318.	0.	4,986.
(6) BRIAN CALLAHAN CHIEF EDUCATION OFFICER	40.00 0.					X		112,547.	0.	13,668.
(7) CHRIS GUNNUFSEN ENGINEERING & IT OFFICER	40.00 0.					X		101,847.	0.	4,355.
(8) HEATHER MAZZONI VICE PRESIDENT OF CONTENT	40.00 0.					X		101,210.	0.	17,789.
(9) JEFFREY SMITH DIRECTOR OF BUS. INTELLIGENCE	40.00 0.					X		105,420.	0.	15,589.
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							1,006,479.	0.	79,268.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,006,479.	0.	79,268.	

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 **7**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **4**

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a						
	b Membership dues	1b	4,280,588.					
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions) . .	1e						
	f All other contributions, gifts, grants, and similar amounts not included above .	1f	1,929,235.					
	g Noncash contributions included in lines 1a-1f: \$		85,232.					
	h Total. Add lines 1a-1f ▶			6,209,823.				
Program Service Revenue	2a EDUCATION SERVICES	Business Code	900099	2,667,535.	2,458,941.	208,594.		
	b PROGRAM UNDERWRITING		517000	1,452,105.	1,452,105.			
	c SCHOOL ASSESSMENTS		900099	518,762.	518,762.			
	d INTERNET SERVICE & WEB DESIGN		517000	191,179.	159,179.	32,000.		
	e PRODUCTION FEES		532000	42,447.	34,350.	8,097.		
	f All other program service revenue			211,859.	81,367.	130,492.		
	g Total. Add lines 2a-2f ▶			5,083,887.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). ▶			365,645.			365,645.	
	4 Income from investment of tax-exempt bond proceeds . ▶			0.				
	5 Royalties ▶			1,041,712.			1,041,712.	
	6a Gross rents	(i) Real		745,828.				
		(ii) Personal						
		b Less: rental expenses		777,730.				
		c Rental income or (loss)		-31,902.				
	d Net rental income or (loss) ▶			-31,902.		-31,902.		
	7a Gross amount from sales of assets other than inventory	(i) Securities		6,723,298.				
		(ii) Other						
		b Less: cost or other basis and sales expenses		6,112,711.				
		c Gain or (loss)		610,587.				
d Net gain or (loss) ▶			610,587.			610,587.		
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 a			5,887.					
	b Less: direct expenses b							
	c Net income or (loss) from fundraising events. ATTCH 4 ▶			5,887.			5,887.	
9a Gross income from gaming activities. See Part IV, line 19 a								
	b Less: direct expenses b							
	c Net income or (loss) from gaming activities. ▶			0.				
10a Gross sales of inventory, less returns and allowances a								
	b Less: cost of goods sold b							
	c Net income or (loss) from sales of inventory. ▶			0.				
Miscellaneous Revenue			Business Code					
11a ADVERTISING REVENUE			541800	59,860.		59,860.		
	b MISCELLANEOUS INCOME		900099	588.	588.			
	c _____							
	d All other revenue							
e Total. Add lines 11a-11d ▶				60,448.				
12 Total revenue. See instructions. ▶				13,346,087.	4,705,292.	407,141.	2,023,831.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	466,643.	261,371.	166,397.	38,875.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	5,399,760.	4,337,643.	370,825.	691,292.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0.			
9 Other employee benefits	803,739.	665,040.	52,395.	86,304.
10 Payroll taxes	419,226.	340,269.	28,969.	49,988.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	41,299.	2,199.	37,776.	1,324.
c Accounting	48,840.	2,600.	44,675.	1,565.
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	37,869.	6,805.	29,172.	1,892.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	125,322.	18,471.	101,164.	5,687.
12 Advertising and promotion	43,049.	40,499.	1,200.	1,350.
13 Office expenses	0.			
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	0.			
17 Travel	96,968.	44,661.	31,499.	20,808.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	101,590.	61,275.	33,086.	7,229.
20 Interest	117,746.		117,746.	
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	862,149.	559,492.	189,161.	113,496.
23 Insurance	157,831.	112,368.	28,418.	17,045.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PUBLIC BROADCASTING SERVICE	1,023,563.	1,023,563.		
b NPR FEES	507,329.	507,329.		
c EDUCATION SOFTWARE & LICENSE	421,980.	421,980.		
d PROGRAM FEES - OTHER	433,312.	433,312.		
e All other expenses <u>ATCH 5</u>	2,842,895.	1,760,887.	468,248.	613,760.
25 Total functional expenses. Add lines 1 through 24e	13,951,110.	10,599,764.	1,700,731.	1,650,615.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,280,085.	1	1,019,818.
	2 Savings and temporary cash investments	0.	2	0.
	3 Pledges and grants receivable, net	3,655,875.	3	309,798.
	4 Accounts receivable, net	405,065.	4	720,374.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	157,412.	9	214,566.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 27,268,234.		
	b Less: accumulated depreciation	10b 22,459,415.	5,603,918.	10c 4,808,819.
	11 Investments - publicly traded securities	ATCH 7 10,097,246.	11	11,167,830.
	12 Investments - other securities. See Part IV, line 11	0.	12	0.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	1,881,787.	15	3,218,737.
16 Total assets. Add lines 1 through 15 (must equal line 34)	23,081,388.	16	21,459,942.	
Liabilities	17 Accounts payable and accrued expenses	1,282,968.	17	1,383,934.
	18 Grants payable	0.	18	0.
	19 Deferred revenue	ATCH 8 165,954.	19	274,744.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	3,701,537.	23	3,259,312.
	24 Unsecured notes and loans payable to unrelated third parties	15,000.	24	55,638.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	0.
	26 Total liabilities. Add lines 17 through 25	5,165,459.	26	4,973,628.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	12,358,198.	27	12,430,718.
	28 Temporarily restricted net assets	5,260,847.	28	3,758,712.
	29 Permanently restricted net assets	296,884.	29	296,884.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	17,915,929.	33	16,486,314.
34 Total liabilities and net assets/fund balances	23,081,388.	34	21,459,942.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,346,087.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,951,110.
3	Revenue less expenses. Subtract line 2 from line 1	3	-605,023.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	17,915,929.
5	Net unrealized gains (losses) on investments	5	-154,938.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	-759,485.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	89,831.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	16,486,314.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2017)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization **HAMPTON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.**

Employer identification number
54-0843118

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.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An 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: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 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.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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 with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2017 (70.21%); 15 Public support percentage from 2016 Schedule A, Part II, line 14 (70.19%); 16a 33 1/3% support test - 2017 (checked); 16b 33 1/3% support test - 2016; 17a 10%-facts-and-circumstances test - 2017; 17b 10%-facts-and-circumstances test - 2016; 18 Private foundation.

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

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," 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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "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.</i>		
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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11 a	
b A family member of a person described in (a) above?	11 b	
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	11 c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2	

Section C. Type II Supporting Organizations

	Yes	No
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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization HAMPTON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.

Employer identification number 54-0843118

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (Sub-rows 2a-2d), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1. b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2017

JSA 7E1268 2.000

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment 88.7200 %
b Permanent endowment 2.5800 %
c Temporarily restricted endowment 8.7000 %
The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) unrelated organizations
(ii) related organizations
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
Table with Yes/No columns for 3a(i), 3a(ii), 3b

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

Part VI Land, Buildings, and Equipment.

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) TOWER RIGHTS	800,377.
(2) SPLIT INTEREST AGREEMENT	1,040,480.
(3) LONG TERM PLEDGES RECEIVABLE	1,377,880.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	3,218,737.

Part X Other Liabilities.

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Includes values for total revenue (14,020,841) and adjusted revenue (13,346,087).

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Includes values for total expenses (14,690,971) and adjusted expenses (13,951,110).

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIII Supplemental Information (continued)

PART V, LINE 4:

THE ENDOWMENT ASSETS ARE INVESTED IN A MANNER THAT IS INTENDED TO PRODUCE A REAL RETURN, NET OF INFLATION AND INVESTMENT MANAGEMENT COSTS, OF AT LEAST 5% OVER THE LONG TERM. THE FUNDS ARE CONTROLLED BY THE BOARD AND \$155,000 PER YEAR IS DISTRIBUTED TO FUND OPERATIONS UNLESS OTHERWISE APPROVED BY THE BOARD.

PART X, LINE 2:

WHRO IS A NOT-FOR-PROFIT CORPORATION, WHICH HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE TO BE EXEMPT FROM FEDERAL TAXES ON INCOME DERIVED FROM ACTIVITIES RELATED TO EXEMPT PURPOSES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IT IS SUBJECT TO INCOME TAXES ON PROFITS, IF ANY, GENERATED FROM ACTIVITIES WHICH ARE UNRELATED TO ITS EXEMPT PURPOSE.

FASB ASC TOPIC 740, INCOME TAXES, PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. WHRO'S MANAGEMENT HAS EVALUATED THE IMPACT OF THE GUIDANCE TO ITS FINANCIAL STATEMENTS. MANAGEMENT IS NOT AWARE OF ANY MATERIAL UNCERTAIN TAX POSITIONS, AND HAS NOT ACCRUED THE EFFECT OF ANY UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2018. WHRO RECOGNIZES INTEREST AND PENALTIES INCURRED, IF ANY, RELATED TO INCOME TAX POSITIONS AS OTHER INTEREST EXPENSE AND PENALTIES EXPENSE, RESPECTIVELY. WHRO HAS A NET OPERATING LOSS CARRYFORWARD OF APPROXIMATELY \$2,433,000 AND \$2,045,000 RELATED TO ITS UNRELATED BUSINESS INCOME AT JUNE 30, 2018 AND 2017, RESPECTIVELY, THAT WILL BEGIN TO EXPIRE IN 2029.

Part XIII Supplemental Information (continued)

WHRO'S INCOME TAX RETURNS ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES, GENERALLY FOR A PERIOD OF THREE YEARS FROM THE DATE THEY WERE FILED. WITH FEW EXCEPTIONS, WHRO IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2014.

RECONCILIATION SCHEDULE D, PARTS XI LINE 2D, AND XII LINE 2D PART XI LINE 2D REPORTS A NET DECREASE TOTALING \$829,692 TO THE CORRESPONDING AMOUNT OF REVENUE REPORTED ON THE AUDITED FINANCIAL STATEMENTS. THE NET DECREASE CONSISTS OF THE FOLLOWING: THE SUM OF (I) CHANGE IN VALUE OF A SPLIT INTEREST AGREEMENT [\$89,831]; AND (II) TOWER RENT EXPENSE [\$777,730], REDUCED BY INVESTMENT MANAGEMENT FEES [\$37,869]. PART XII LINE 2D REPORTS A NET DECREASE TOTALING \$739,861 TO THE CORRESPONDING AMOUNT OF EXPENSE REPORTED ON THE AUDITED FINANCIAL STATEMENTS. THE NET DECREASE CONSISTS OF TOWER RENT EXPENSE [\$777,730] REDUCED BY INVESTMENT MANAGEMENT FEES [\$37,869].

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2017

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization **HAMPTON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.**

Employer identification number
54-0843118

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 DMW WORLDWIDE, LLC	DIRECT MAIL PROGRAM MGT		X		70,490.	
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total					70,490.	

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
11 Net income summary. Subtract line 10 from line 3, column (d) ▶					

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

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

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization **HAMPTON ROADS EDUCATIONAL
TELECOMMUNICATIONS ASSOCIATION, INC.**

Employer identification number
54-0843118

Part I Questions Regarding Compensation

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

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

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

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

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

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

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

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

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

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2017

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 BERTEL SCHMIDT PRESIDENT & CEO	(i)	231,490.	0.	0.	7,405.	9,104.	247,999.	
	(ii)	0.	0.	0.				
2 DIANE ROGIC DIRECTOR OF CORPORATE SUPPORT	(i)	166,318.	0.	0.	0.	4,986.	171,304.	
	(ii)	0.	0.	0.				
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization **HAMPTON ROADS EDUCATIONAL
TELECOMMUNICATIONS ASSOCIATION, INC.**

Employer identification number
54-0843118

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1,132.	85,232.	FAIR MKT VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2017)

JSA

7E1298 1.000

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

WHRO USES A THIRD PARTY ORGANIZATION TO COLLECT DONATED CARS, SELL THEM
AND HANDLE THE LEGAL PAPERWORK.

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

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization
HAMPTON ROADS EDUCATIONAL
TELECOMMUNICATIONS ASSOCIATION, INC.

Employer identification number
54-0843118

ADDITIONAL INITIATIVES INCLUDE:

THE WHRO VOICE, A RADIO READING SERVICE FOR THE VISUALLY AND PHYSICALLY
CHALLENGED, FEATURING READINGS OF THE VIRGINIAN PILOT, THE DAILY PRESS,
AND OTHER REGIONAL PUBLICATIONS. THE SCENE, WHICH SHOWCASES THE ARTS IN
HAMPTON ROADS BY COVERING EMERGING ARTISTS WITH FEATURE WEBISODES. LET'S
EAT, A BLOG OFFERING INSIGHTS FOR THE LOCAL FOODIE AND THE WHRO'S
VETERAN'S PROJECT AND ONLINE FORUM WHICH FOSTERS DIALOGUE ABOUT
VERTERAN'S ISSUES AND OFFERS RESOURCES AND SOLUTIONS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PRODUCTION & PUBLIC INFORMATION PROGRAMS. TO PROVIDE PUBLIC INFORMATION
AND TO SUPPORT THE ACTIVITIES OF WHRO.

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

THE BOARD RECEIVES A COPY OF THE RETURN BY E-MAIL BEFORE THE RETURN IS
FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ONCE A YEAR, DURING THE SEPTEMBER BOARD MEETING, WE POLL THE BOARD AND
HAVE THEM FILL OUT AND SIGN A WRITTEN STATEMENT.

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

WE PUT THE ANNUAL REPORT (CONTAINING FINANCIALS) ON OUR WEBSITE.

OTHERWISE, EVERYTHING IS IN OUR PUBLIC FILE AND IS AVAILABLE UPON

Name of the organization HAMPTON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.	Employer identification number 54-0843118
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REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 89,831

FORM 990, PART XI, LINE 2C:

THE INDEPENDENT AUDITORS MEET WITH THE AUDIT COMMITTEE EACH YEAR BEFORE AND AFTER THE AUDIT. THE AUDIT IS REVIEWED WITH THE AUDITORS AND THE AUDIT COMMITTEE BEFORE BEING APPROVED.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE HAMPTON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC. (T/A WHRO) ("WHRO") IS A DIVERSE REGIONAL PUBLIC MEDIA NON-PROFIT ORGANIZATION SERVING MORE THAN 2.2 MILLION CITIZENS IN SOUTHEASTERN VIRGINIA AND NORTHEASTERN NORTH CAROLINA. WHRO PROMOTES EDUCATION, CULTURE, AND CITIZENSHIP THROUGH A VARIETY OF MEDIA SERVICES AND COMMUNITY EVENTS. WHRO PROVIDES INSPIRING AND EDUCATIONAL TELEVISION PROGRAMS THROUGH ITS PUBLIC TELEVISION STATIONS, AND IT PROVIDES MUSIC, NEWS, AND PUBLIC AFFAIRS PROGRAMMING THROUGH ITS RADIO STATIONS, LIVE STREAMS ON THE WHRO WEBSITE, AND THROUGH THE WHRO MEDIA APP AND CONTACT ON THE DIGITAL PLATFORM. FOUNDED MORE THAN 50 YEARS AGO TO SUPPORT CLASSROOM EDUCATION, WHRO EMPLOYS CREATIVITY AND TECHNOLOGY TO SERVE ITS MISSION OF ENRICHING AUDIENCES WITH CONTENT THAT EDUCATES, ENTERTAINS, AND ENGAGES. WHRO ALSO DELIVERS EDUCATIONAL CONTENT IN THE FORM OF DIGITAL LEARNING OBJECTS TO STUDENTS AND EDUCATORS THROUGHOUT VIRGINIA THROUGH ITS ONLINE LEARNING DISTRIBUTION PLATFORM EMEDIAVA. WHRO ALSO OFFERS

Name of the organization **HAMPTON ROADS EDUCATIONAL
TELECOMMUNICATIONS ASSOCIATION, INC.**

Employer identification number
54-0843118

ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

PROFESSIONAL DEVELOPMENT RESOURCES FOR TEACHERS THROUGH ONLINE
COURSES AND HANDS-ON WORKSHOPS.

WHRO IS LICNESED BY THE FEDERAL COMMUNICATIONS COMMISSION TO OPERATE
A NON-COMMERCIAL PUBLIC TELEVISION STATION - WHRO 15 DIGITAL

(INCLUDING WHRO HD, WHRO KIDS, WHRO WORLD, AND WHRO CREATE); TWO

NON-COMMERCIAL PUBLIC RADIO STATIONS - WHRO 90.3 FM AND ITS

ASSOCIATED DIGITAL CHANNELS (WHRO DIGITAL AND THE 1920'S RADIO

NETWORK) AND WHRV 89.5 FM AND ITS ASSOCIATED DIGITAL CHANNELS (WHRV

DIGITAL AND ALTRADIO); EDUCATIONAL BROADBAND SERVICES (EBS) AND

SATELLITE TRANSMISSION FACILITIES AND THE WHRO RADIO READING SERVICE,

"THE VOICE," FOR THE VISUALLY IMPAIRED. WHRO ADDED ADDITIONAL

TRANSMITTERS IN 2011 TO EXTEND AND IMPROVE ITS RADIO BROADCAST

FOOTPRINT AND PROVIDE PUBLIC RADIO SERVICES IN UNDERSERVED AREAS.

TRANSMITTER CALL SIGNS (REPEATED SIGNAL), FREQUENCY AND STATION OF

LICENSE ARE AS FOLLOWS: 88.1 WHRL (WHRV) EMPORIA, WHRF (WHRV), 88.5

GLOUCESTER POINT; WHRJ (WHRO), 89.9 GLOUCESTER COURTHOUSE; WHRE

(WHRV), 91.9 EASTVILLE; WHRX (WHRV), 90.1 NASSAWADDOX, 98.3 WHRF

(WHRO) BELLE HAVEN. THE WHRO WEBSITE FEATURES LIVE AUDIO STREAMS FOR

WHRO, WHRV, THE VOICE, ALTRADIO, AND THE 1920'S RADIO NETWORK.

STUDIOS, SATELLITE, TECHNICAL CONTROL, TELECONFERENCE FACILITIES, AND

OFFICES ARE HOUSED IN NORFOLK, VIRGINIA; WHRO OPERATES A SATELLITE

OFFICE AND STUDIO IN WILLIAMSBURG, VIRGINIA. MAJOR TRANSMISSION

FACILITIES ARE LOCATED IN SUFFOLK, VIRGINIA, WITH ADDITIONAL FM RADIO

TRANSMISSION FACILITIES IN SOUTHEASTERN VIRGINIA AND MULTI-POINT

MICROWAVE RELAY TOWERS ARE DISPERSED THROUGHOUT VIRGINIA.

Name of the organization HAMPSON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.	Employer identification number 54-0843118
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ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

BROADCAST AND DIGITAL CONTENT- WHRO IS THE THE LOCAL PUBLIC TELEVISION BROADCASTER IN SOUTHEASTERN VIRGINIA, PROVIDING QUALITY TELEVISION PROGRAMMING ON FOUR CHANNELS 24 HOURS A DAY. FROM CHILDREN'S SHOWS LIKE SESAME STREET, DANIEL TIGER'S NEIGHBORHOOD AND READY, JET, GO! TO PBS SHOWCASE PROGRAMS LIKE NOVA, MASTERPIECE, PBS NEWSHOUR, AMERICAN EXPERIENCE AND FRONTLINE, WHRO -TV 15 PROVIDES QUALITY PROGRAMMING FOR ALL AGES. LOCAL BROADCASTS AND DIGITAL CONTENT INCLUDE, CURATE, CINEMA 15, MUSIC & MIGHT, LOCAL CONGRESSIONAL AND SENATORIAL DEBATES AND A DOCUMENTARIES SUCH AS #YOUNGSINGERSPROJECT AND COMEDY BOOTCAMP. WHRO BROADCASTS EDUCATIONAL TELEVISION THAT DELIGHTS CHILDREN WHILE BUILDING READING, SCIENCE, TECHNOLOGY AND MATH SKILLS, PROGRAMS FOR LIFE-LONG LEARNING, PUBLIC AFFAIRS ANALYSIS AND DOCUMENTARIES, PERFORMANCE PROGRAMMING CELEBRATING CULTURAL DIVERSITY AND THE COUNTRY, ACCLAIMED HISTORY, SCIENCE AND NATURE PROGRAMMING, AND THE BEST IN INDEPENDENT FILMS. WHRV 89.5 FM RADIO IS THE PLACE TO HEAR NPR PROGRAMS LIKE MORNING EDITION AND ALL THINGS CONSIDERED, AMERICAN PUBLIC MEDIA'S MARKETPLACE, AS WELL AS ALTERNATIVE, JAZZ AND FOLK MUSIC. CALL IN SHOWS HEARSAY WITH CATHY LEWIS AND ANOTHER VIEW HOSTED BY BARBARA HAMM LEE PROVIDE A FORUM TO THE OPEN EXCHANGE OF IDEAS AND OPINIONS. PODCASTS/BROADCASTS INCLUDE MIND OVER MANNERS, OUT THE BOX ALBUM OF THE WEEK, THIS WEEK IN MAL'S WORLD, OPENING NIGHT WITH REBECCA EVANS, BIRDNOTES, STROME BUSINESS MINUTE, EDUCATIONALLY SPEAKING, THE EMERGING LEADERS SMART PILL, WRITER'S BLOCK AND ARTS CONVERSATIONS. WHRO 90.3 FM

Name of the organization **HAMPTON ROADS EDUCATIONAL
TELECOMMUNICATIONS ASSOCIATION, INC.**

Employer identification number
54-0843118

ATTACHMENT 2 (CONT'D)

RADIO PROVIDES 24-HOUR CLASSICAL MUSIC AND FINE ARTS PROGRAMMING AND IS AN IMPORTANT CONNECTION BETWEEN THE MANY FINE PERFORMING ARTS ORGANIZATIONS IN THE AREA AND THE COMMUNITY THROUGH PARTNERSHIPS TO RECORD AND BROADCAST CONCERTS, PROMOTE EVENTS, AND HIGHLIGHT THE RICH CULTURAL OFFERINGS OF OUR REGION INCLUDING BROADCASTS OF PERFORMANCES BY VISITING ARTISTS WITH THE VIRGINIA ARTS FESTIVAL, VIRGINIA SYMPHONY AND VIRGINIA OPERA.

ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
PUBLIC BROADCASTING SERVICE PO BOX 751550 CHARLOTTE, NC 28275	PROGRAM FEES/DUES	1,031,806.
NATIONAL PUBLIC RADIO, INC. PO BOX 79540 BALTIMORE, MD 21279	PROGRAM FEES/DUES	688,044.
DESIRE 2 LEARN 715 ST PAUL ST BALTIMORE, MD 21202	EDUCATIONAL SERVICES	269,047.
AMERICAN PUBLIC MEDIA PO BOX 70870 ST. PAUL, MN 55170	PROGRAM FEES/DUES	145,370.

ATTACHMENT 4

Name of the organization HAMPTON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.	Employer identification number 54-0843118
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ATTACHMENT 4 (CONT'D)

FORM 990, PART VIII - FUNDRAISING EVENTS

<u>DESCRIPTION</u>	<u>GROSS INCOME</u>	<u>NET INCOME</u>
FUND RAISING	5,887.	5,887.
TOTALS	<u>5,887.</u>	<u>5,887.</u>

ATTACHMENT 5

FORM 990, PART IX - OTHER EXPENSES

<u>DESCRIPTION</u>	<u>(A) TOTAL EXPENSES</u>	<u>(B) PROGRAM SERVICE EXP.</u>	<u>(C) MANAGEMENT AND GENERAL</u>	<u>(D) FUNDRAISING EXPENSES</u>
TELEPHONE AND BANDWIDTH	307,662.	198,957.	67,941.	40,764.
COMPUTER MAINTENANCE CONTRACTS	532,147.	457,243.	74,904.	
LISTING SERVICES & AUDIENCE RE	3,606.	3,606.		
REPAIRS & MAINTENANCE	225,111.	143,914.	50,885.	30,312.
TEMPORARY SERVICES AND GRAPHIC	3,722.	471.	2,651.	600.
FUNDRAISING PREMIUMS	103,357.	685.		102,672.
OFFSITE STORAGE RENT	73,392.	2,800.	70,112.	480.
POSTAGE AND SHIPPING	264,601.	63,910.	9,806.	190,885.
PRODUCTION COSTS - OTHER	74,012.	66,163.		7,849.
MISCELLANEOUS	16,400.	8,276.	7,647.	477.
PROPERTY TAXES	131.	131.		
PAPER, PRINTING, AND STATIONAR	141,112.	103,926.	3,277.	33,909.
DUES AND SUBSCRIPTIONS	262,219.	201,254.	45,840.	15,125.
SUPPLIES AND SUBSCRIPTIONS	83,966.	62,005.	14,997.	6,964.
CREDIT CARD AND BANK FEES	185,538.	3,063.	47,416.	135,059.
UTILITIES	202,303.	85,867.	72,772.	43,664.
STREAMING FEES	8,400.	8,400.		

Name of the organization HAMPTON ROADS EDUCATIONAL
TELECOMMUNICATIONS ASSOCIATION, INC.

Employer identification number
54-0843118

ATTACHMENT 5 (CONT'D)

FORM 990, PART IX - OTHER EXPENSES

<u>DESCRIPTION</u>	<u>(A) TOTAL EXPENSES</u>	<u>(B) PROGRAM SERVICE EXP.</u>	<u>(C) MANAGEMENT AND GENERAL</u>	<u>(D) FUNDRAISING EXPENSES</u>
INDEPENDENT CONTRACTORS AND TA	355,216.	350,216.		5,000.
TOTALS	<u>2,842,895.</u>	<u>1,760,887.</u>	<u>468,248.</u>	<u>613,760.</u>

ATTACHMENT 6

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
PREPAID EXPENSES	209,214.
INVENTORY - PREMIUMS	5,352.
TOTALS	<u>214,566.</u>

ATTACHMENT 7

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
INVESTMENTS	11,167,830.	FMV
TOTALS	<u>11,167,830.</u>	

ATTACHMENT 8

Name of the organization **HAMPTON ROADS EDUCATIONAL
TELECOMMUNICATIONS ASSOCIATION, INC.**

Employer identification number
54-0843118

ATTACHMENT 8 (CONT'D)

FORM 990, PART X - DEFERRED REVENUE

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
DEFERRED REVENUE	274,744.
TOTALS	<u>274,744.</u>

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2017

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization HAMPTON ROADS EDUCATIONAL TELECOMMUNICATIONS ASSOCIATION, INC.

Employer identification number 54-0843118

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Table with 6 columns: (a) Name, address, and EIN (if applicable) of disregarded entity; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Total income; (e) End-of-year assets; (f) Direct controlling entity. Rows 1-6 are empty.

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.

Table with 7 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Exempt Code section; (e) Public charity status (if section 501(c)(3)); (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity? (Yes/No). Rows 1-7 are empty.

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

Schedule R (Form 990) 2017

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) THE 1920S RADIO NETWORK LLC 2412 JOHNSTOWN RD CHESAPEAKE, VA 23322			N/A						
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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.

	Yes	No
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?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	
e Loans or loan guarantees by related organization(s)	1e	
f Dividends from related organization(s)	1f	
g Sale of assets to related organization(s)	1g	
h Purchase of assets from related organization(s)	1h	
i Exchange of assets with related organization(s)	1i	
j Lease of facilities, equipment, or other assets to related organization(s)	1j	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	
o Sharing of paid employees with related organization(s)	1o	
p Reimbursement paid to related organization(s) for expenses	1p	
q Reimbursement paid by related organization(s) for expenses	1q	
r Other transfer of cash or property to related organization(s)	1r	
s Other transfer of cash or property from related organization(s)	1s	

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

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

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

For calendar year 2017 or other tax year beginning 07/01, 2017, and ending 06/30, 2018.

2017

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Form header section containing: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year; D Employer identification number; E Unrelated business activity codes; F Group exemption number; G Check organization type.

Form section H-I: H Describe the organization's primary unrelated business activity; I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?; J The books are in care of TOM MOREHOUSE Telephone number 757-889-9400

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include: 1a Gross receipts or sales; 1b Less returns and allowances; 2 Cost of goods sold; 3 Gross profit; 4a Capital gain net income; 4b Net gain (loss); 4c Capital loss deduction for trusts; 5 Income (loss) from partnerships and S corporations; 6 Rent income (745,828); 7 Unrelated debt-financed income; 8 Interest, annuities, royalties, and rents from controlled organizations; 9 Investment income of a section 501(c)(7), (9), or (17) organization; 10 Exploited exempt activity income; 11 Advertising income (59,860); 12 Other income (379,183); 13 Total. Combine lines 3 through 12 (1,184,871).

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include: 14 Compensation of officers, directors, and trustees (22,755); 15 Salaries and wages; 16 Repairs and maintenance; 17 Bad debts; 18 Interest (attach schedule); 19 Taxes and licenses; 20 Charitable contributions (See instructions for limitation rules); 21 Depreciation (21); 22 Less depreciation claimed on Schedule A and elsewhere on return (22a); 23 Depletion; 24 Contributions to deferred compensation plans; 25 Employee benefit programs; 26 Excess exempt expenses (Schedule I); 27 Excess readership costs (Schedule J); 28 Other deductions (ATTACHMENT 2) (584,957); 29 Total deductions. Add lines 14 through 28 (607,712); 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 (-388,016); 31 Net operating loss deduction (limited to the amount on line 30); 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 (-388,016); 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) (1,000); 34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 (-388,016).

For Paperwork Reduction Act Notice, see instructions.

Part III Tax Computation

Table with 4 columns: Description, Amount, Line Number, and Total. Rows include Organizations Taxable as Corporations, Trusts Taxable at Trust Rates, Proxy tax, Alternative minimum tax, Tax on Non-Compliant Facility Income, and Total.

Part IV Tax and Payments

Table with 4 columns: Description, Amount, Line Number, and Total. Rows include Foreign tax credit, Other credits, General business credit, Credit for prior year minimum tax, Total credits, Subtract line 41e from line 40, Other taxes, Total tax, Payments (A 2016 overpayment credited to 2017, 2017 estimated tax payments, Tax deposited with Form 8868, Foreign organizations, Backup withholding, Credit for small employer health insurance premiums, Other credits and payments), Total payments, Estimated tax penalty, Tax due, Overpayment, and Enter the amount of line 49 you want.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question, Yes, No. Rows include: 51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account...; 52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?; 53 Enter the amount of tax-exempt interest received or accrued during the tax year.

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature and Preparer Information section. Includes fields for Signature of officer, Date, Title, Preparer's name, Preparer's signature, Date, Firm's name, Firm's address, Firm's EIN, and Phone no. Includes a checkbox for 'May the IRS discuss this return with the preparer shown below'.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line		
3 Cost of labor	3		6 from line 5. Enter here and in		
4a Additional section 263A costs			Part I, line 2	7	
(attach schedule)	4a		8 Do the rules of section 263A (with respect to		
b Other costs (attach schedule)	4b		property produced or acquired for resale) apply		Yes No
5 Total. Add lines 1 through 4b	5		to the organization?		<input type="checkbox"/> <input checked="" type="checkbox"/>

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1. Description of property

(1) TOWER RENT
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) ATTACHMENT 3
(1)	745,828.	777,730.
(2)		
(3)		
(4)		
Total	Total 745,828.	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶ 745,828.

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶ 777,730.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals ▶			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8 ▶				

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations				
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Totals ▶

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).

Totals ▶

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.

Totals ▶

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						

Totals (carry to Part II, line (5)) . . . ▶

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) WHRO MEMBER GUIDE	59,860.	187,445.	-127,585.			
(2)						
(3)						
(4)						
Totals from Part I. ▶						
	Enter here and on page 1, Part I, line 11, col (A).	Enter here and on page 1, Part I, line 11, col (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5) ▶	59,860.	187,445.				

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2) ATTACHMENT 4		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14 ▶			22,755.

ATTACHMENT 1

PART I - LINE 12 - OTHER INCOME

EDUCATIONAL PROGRAM REVENUE	15,683.
EQUIPMENT AND FACILITY LEASE	32,525.
BROADCAST FEES	330,975.

PART I - LINE 12 - OTHER INCOME	<u>379,183.</u>
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FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION UNDER SECTION 199

EDUCATIONAL PROGRAM REVENUE DIRECT EXPENSES	102,897.
EQUIPMENT AND FACILITY LEASE DIRECT EXPENSES	71,751.
BROADCAST FEES DIRECT EXPENSES	410,309.

PART II - LINE 28 - OTHER DEDUCTIONS	<u>584,957.</u>
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SCHEDULE C - RENT INCOME DEDUCTIONSTOWER RENT

SALARIES	206,032.
DEPRECIATION	188,744.
UTILITIES AND TELEPHONE	201,992.
BANDWIDTH	69,783.
REPAIRS	55,922.
FUEL	4,873.
PROPERTY TAXES	2,497.
SUPPLIES AND OTHER COSTS	47,887.
TOTAL	<u>777,730.</u>

ATTACHMENT 4SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
BERTEL SCHMIDT 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	PRESIDENT & CEO	0	0.
THOMAS MOREHOUSE 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	CHIEF FINANCIAL OFFICER	6.000000	7,628.
DOUGLAS WEISS 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	CHIEF OPERATING OFFICER	0	0.
DIANE ROGIC 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	DIRECTOR OF CORPORATE SUPPORT	0	0.
VIRGINIA WERNER 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	ASSISTANT SECRETARY	25.000000	15,127.
BRIAN CALLAHAN 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	CHIEF EDUCATION OFFICER	0	0.
CHRIS GUNNUFSEN 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	ENGINEERING & IT OFFICER	0	0.
HEATHER MAZZONI 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	VICE PRESIDENT OF CONTENT	0	0.
JEFFREY SMITH 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	DIRECTOR OF BUS. INTELLIGENCE	0	0.
LIST OF DIRECTORS ATTACHED 5200 HAMPTON BOULEVARD NORFOLK, VA 23508-1507	DIRECTORS	0	0.

ATTACHMENT 4 (CONT'D)

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
TOTAL COMPENSATION			<u>22,755.</u>

FORM 990-T EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN

NET OPERATING LOSS CARRYFORWARDS

YEAR ENDING	ORIGINAL NOL	AMOUNT AVAILABLE	AMOUNT USED	CONVERTED CONTRIBUTIONS	CARRYOVER TO NEXT YEAR
06/30/2009		55,594.			55,594.
06/30/2010		395,119.			395,119.
06/30/2011		136,417.			136,417.
06/30/2012		119,861.			119,861.
06/30/2013		134,607.			134,607.
06/30/2014		39,170.			39,170.
06/30/2015		293,039.			293,039.
06/30/2016	377,589.	377,589.			377,589.
06/30/2017	450,083.	450,083.			450,083.
06/30/2018	388,016.	388,016.			388,016.
TOTAL	1,215,688.	2,389,495.			2,389,495.



The Board of Directors
FY2018: July 1, 2017 -June 30, 2018

Name	Professional Affiliation	Mailing Address Phone & E.mail	Term Expires June 30th
Anne C. H. CONNER <i>Chair</i>	President Public Finance and Community Investment TowneBank	6001 Harbor View Boulevard Suffolk, VA 23435 P 757.673.1602 (o) P 757.288.4837 (c) E anne.conner@townebank.net	2019 3 rd term
Scott DUNCAN <i>Vice Chair</i>	Senior VP/GM Capital Group/American Funds	5300 Robin Hood Road Norfolk, VA 23513 P (757) 670-4949 E smd@capgroup.com	2019 2 nd term
Mary HADDAD <i>Secretary</i>	President Louis and Mary Haddad Foundation	4950 Exeter Drive Suffolk, VA 23434 P 757.242.0042 E mary@louandmaryhaddadfdn.org	2020 2 nd term
Allan "Rik" RIKKOLA <i>Treasurer</i>	Retired Executive Director Executive Partners / College of William & Mary	1908 Miln House Road Williamsburg, VA 23185 P 757.221.0773 (h) P 757.880.3213 (c) E aarikkola@aol.com	2018 2 nd term
Bert SCHMIDT	President & CEO WHRO	5200 Hampton Boulevard Norfolk, VA 23508 P 757.889.9410 (o) P 757.748.3505 (c) E bert.schmidt@whro.org	Ex Officio
Dr. Tony ATWATER	Professor Norfolk State University	700 Park Avenue, Norfolk, VA 23504 P 757.823.2660 (o) P 724.762.8336 (c) E dr.tonyatwater@yahoo.com	2018 2 nd term
Jayne BARNARD	Professor of Law Emerita Coordinator, 100 th Anniversary of Women, College of William & Mary	P.O. Box 8795 Williamsburg, VA 23187-8795 P 757.221.3849 E jwbarn@wm.edu	2020 2 nd term
Ronnie COHEN	Director & Academic Chair Luter School of Business Christopher Newport University	P.O. Box 161 White Marsh, VA 23183 P 804.693.6855 P 757.594.7075 E cohen.r52@gmail.com	2018 2 nd term



The Board of Directors
FY2018: July 1, 2017 -June 30, 2018

Name	Professional Affiliation	Mailing Address Phone & E.mail	Term Expires June 30th
Dr. John DEVER	President Thomas Nelson Community College	99 Thomas Nelson Drive Hampton, VA 23670 P 757.825.2711 (o) P 703.862.5153 (c) E deverj@tncc.edu	2018 1 st term
Michael DIVARIS	President Divaris Real Estate Inc.	One Columbus Center, Suite 700 Virginia Beach, VA 23462 P 757.497.2113 E mdivaris@divaris.com	2019 2 nd term
Lee ENTSMINGER	President Entsminger Consulting LLC	913 Holladay Point Virginia Beach, VA 23451 P 757.648.8373 P 713.213.6728 (c) E Ldentsm@gmail.com	2018 1 st term
Jay FORD	Executive Director Virginia Eastern Shorekeepers	PO Box 961 Eastville, VA 23347 P 757.971.2600 E Jay@shorekeeper.org	2020 1 st term
Eric FOX	Senior VP- Wealth Mgmt	440 Monticello Avenue, Ste 2000 Norfolk, VA 23510-2101 P 757.624.3364 E eric.fox@ubs.com	2020 1 st term
Faye GARGIULO	Vice President Riverside Health System	701 Town Center Drive, Suite 100 Newport News, VA 23606-4286 P 757.534.7036 E faye.gargiulo@rivhs.com	2020 2 nd term
Linda Thomas- GLOVER	President & CEO Eastern Shore Community College	29300 Lankford Hwy Melfa, VA 23410 P 757.789.1789 (o) P 757.709.5445 © E lglover@es.vccs.edu	2020 1 st term
Elizabeth “Ellie” GORDON	Community/Civic Leader	P.O. Box 67 Franktown, VA 23354 P 757.442.3682 (h) P 757.710.0763 (c) E cegordon@esva.net	2018 2 nd term



The Board of Directors
FY2018: July 1, 2017 -June 30, 2018

Name	Professional Affiliation	Mailing Address Phone & E.mail	Term Expires June 30th
Edward "Ted" HENIFIN	General Manager Hampton Roads Sanitation District	63 Cherokee Road Hampton, VA 23661 P 757.274-7904 (c) E EHenifin@hrsdc.com	2019 1 st term
David IWANS	President Dave Iwans & Associates	223 East City Hall, Suite 400 Norfolk, VA 23510 P 757.314.3105 E Dave.Iwans@diainc.com	2019 2 nd term
Mark JOHNSON	VP/Community Develmt Mgr SunTrust Bank	150 West Main Street, 14 th Floor Norfolk, VA 23510 P 757.624.5699 (o) P 757.729.4780 (c) E mark.a.johnson@suntrust.com	2020 1 st term
Christopher KASTNER	Executive VP & CFO Huntington Ingalls Industries	4101 Washington Avenue Newport News, VA 23607 P 757.380.7600 E chris.kastner@hii.ingalls.com	2020 2 nd term
Angelica LIGHT	Vice Chair Elevate Early Education	1221 S. Fairwater Drive Norfolk, VA 23508 P 757.423.0149 P 757.639.8018 (c) E angelica.light@cox.net	2020 2 nd term
Andria McCLELLAN	Councilwoman City of Norfolk	531 Warren Crescent Norfolk, VA 23507 P 757.963.7856 (h) P 757.679.2883 (c) E andria.mcclellan@gmail.com	2018 1 st term
Ashley McLEOD	Communications & Membership Director Virginia Maritime Assoc.	236 E. Plume Street Norfolk, VA 23510 P 757.628.2678 (o) P 757.748.7084 (c) E ashley@vamaritime.com	2020 1 st term
Patrick McDERMOTT	Attorney at Law McDermott & Ward, P. C.	12350 Jefferson Avenue Newport News, VA 23602 P 757.722.0611 E pmcdermott@mcdermottward.com	2020 2 nd term



The Board of Directors
FY2018: July 1, 2017 -June 30, 2018

Name	Professional Affiliation	Mailing Address Phone & E.mail	Term Expires June 30th
Dr. Cassandra NEWBY- ALEXANDER	Professor/Director Norfolk State University J. Jenkins Roberts Center for African Diaspora	4116 Lakeview Drive Chesapeake, VA 23323 P 757.823.2268 (o) P 757.537.0812 (c) E cnewby-alexander@nsu.edu	2018 1 st term
Dr. Jennifer PARISH	Superintendent Poquoson Public Schools	500 City Hall Avenue Poquoson, VA 23662 P 757.868.3053 (o) P 757.903.9011 (c) E jennifer.parish@poquoson.k12.va.us	2019 1 st term
Ann PHILLIPS	Rear Admiral, US Navy (Ret) A.C. Phillips, LLC	211 Sir Oliver Road Norfolk, VA 23510 P 757.971.3414 E annclairephillips@gmail.com	2020 1 st term
Barry POLLARA	Executive Director, UBS Financial Services	One Commercial Place Norfolk, VA 23510 P 757.624.2170 E barry.pollara@verizon.net	2019 1 st term
Victoria PROFFITT	Chesapeake Public School Board/ EAC Rep Chair HRETA	1001 Copper Stone Circle Chesapeake, VA 23320 P 757-547-7438 (o) P 757-630-7391 (c) E Victoria.Proffitt@cpschools.com	Ex Officio
Robert REY	Subsidiary President PRA Group, Inc.	130 Corporate Blvd Norfolk, VA 23502 P 757.961.3502 (o) P 757.636.2349 (c) E reyrobert@msn.com	2020 1 st term
Dr. James ROBERTS	Superintendent Chesapeake Public Schools	312 Cedar Road Chesapeake, VA 23322 P 757.547.0165 E jim.roberts@cpschools.com	2018 1 st term
Win SHORT	Attorney Kaufman and Canoles	11815 Fountain Way, Suite 400 Newport News, VA 23606 P 757.873.6301 (o) P 757.2916285 (c) E washort@kaufcan.com	2020 1 st term



**The Board of Directors
FY2018: July 1, 2017 -June 30, 2018**

Name	Professional Affiliation	Mailing Address Phone & E.mail	Term Expires June 30th
Leonard SLEDGE	Director, Office of Economic Development, City of Hampton	One Franklin Street, Suite 600 Hampton VA , VA 23669 P 757.728.5165 (o) P 757.751.3195 (c) E lsledge@hampton.gov	2018 2 nd term
Guy TOWER	Mediator The McCammon Group	3810 Atlantic Ave., Apt 1204 Virginia Beach, VA 23451 P 804.398.0070 E guytower@gmail.com	2018 2 nd term
Dr. Alan WAGNER	President Wagner Macula & Retina	5520 Greenwich Road Suite 204 Virginia Beach, VA 23462 P 757.481.4400 E awagner@wagnerretina.com	2019 2 nd term
Randy WEBB	President & CEO Signature	101 W. Main Street, Suite 700 Norfolk, VA 23510 P 757.961.5215 E randy@signatureus.com	2020 3rd term
J. Scott WHEELER	President Bay Diesel	3736 Cook Boulevard Suffolk VA 23323 P 800.215.4005 (o) P 757.478.7590 (c) E scott.wheeler@baydiesel.com	2018 1 st term
Dr. Deran WHITNEY	Superintendent Suffolk Public Schools	100 N. Main Street Suffolk, VA 23434 P 757.925.6750 E derwhitney@spsk12.net	2019 2 nd term
- o0o -			
Ginny WERNER <i>Assistant Secretary</i>	Assistant to the President WHRO	5200 Hampton Boulevard Norfolk VA 23508 P 757.889.9420 E ginny.werner@whro.org	
Tom MOREHOUSE <i>Assistant Treasurer</i>	Chief Financial Officer WHRO	5200 Hampton Boulevard Norfolk VA 23508 P 757.889.9316 E tom.morehouse@whro.org	

**2017 Virginia Corporation
 Income Tax Return**



Attention: Return must be filed electronically. Use this form only if you have an approved waiver.

Official Use Only

FISCAL or
 SHORT Year Filer: **Beginning Date** 07/01, 2017; **Ending Date** 06/30, 2018
 Short Year Return Change in Accounting Period

By checking the box to the right, I (we) authorize the Department to discuss this return with the undersigned preparer. →

FEIN <u>54-0843118</u>		Check all that apply: <input type="checkbox"/> Initial Filer <input type="checkbox"/> Name Change <input type="checkbox"/> Mailing Address Change <input type="checkbox"/> Physical Address Change	
Name <u>HAMPTON ROADS EDUCATIONAL</u>			
Mailing Address <u>5200 HAMPTON BOULEVARD</u>			
City or Town <u>NORFOLK</u>	State <u>VA</u>	ZIP Code <u>23508</u>	
Physical Address (if different from Mailing Address)		Entity Type Code <u>NP</u>	
Physical City or Town	State	ZIP Code	NAICS <u>515100</u>

Date Incorporated <u>05/17/1961</u>	State or Country of Incorporation <u>VA</u>	Description of Business Activity <u>PUBLIC BROADCASTING</u>
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<p>Check Applicable Boxes</p> <input type="checkbox"/> Consolidated - Sch. 500AC Enclosed <input type="checkbox"/> Combined - Sch. 500AC Enclosed <input type="checkbox"/> Change in Filing Status <input type="checkbox"/> Multistate Sch. 500A Enclosed <input type="checkbox"/> Schedule 500AB Enclosed <input type="checkbox"/> Nonprofit Corporation Enter number of affiliates _____	<p>Final Return</p> <input type="checkbox"/> Final Return - Check here and applicable boxes below. <input type="checkbox"/> Withdrawn <input type="checkbox"/> Dissolved - No longer liable for tax. Dissolved Date _____ <input type="checkbox"/> Merged Merger Date _____ Merged FEIN # _____ <input type="checkbox"/> S Corp Effective _____	<p>Corporate Telecommunications Company</p> Enter amount from Form 500T, Line 7: _____ .00 <p>Noncorporate Telecommunications Company Check box and enter amount from Form 500T, Line 10: <input type="checkbox"/> _____ .00 <p>Electric Supplier Company</p> Enter amount from Sch 500EL, Line 7 or 14: _____ .00 </p>
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<p>Amended Return</p> Complete Form 500 and Schedule 500ADJ. Enclose an explanation of changes to income and modifications. DO NOT FILE THIS FORM TO CARRY BACK A NET OPERATING LOSS. File Form 500NOLD.	<input type="checkbox"/> Amended Return - Check here and other applicable boxes. <input type="checkbox"/> Federal Audit - Attach copy of IRS final determination. <input type="checkbox"/> Schedule 500A Changes <input type="checkbox"/> Schedule 500ADJ Changes	<input type="checkbox"/> Nonrefundable or Refundable Credit Change <input type="checkbox"/> Schedule 500AB Changes <input type="checkbox"/> Capital Loss Carryback <input type="checkbox"/> Other - Enclose explanation.
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Questions and Related Information

A Have you made any payments to an affiliated corporation, a related individual, or other related entity for interest, royalties or other expenses related to intangible property (patents, trademarks, copyrights, and similar intangible property)? If yes, complete and enclose Schedule 500AB.
 Enter Exception amount from Schedule 500AB, Line 8 **A** _____ .00
B XXXXXXXXXXXXXXXXXXXX

C If a net operating loss deduction was claimed in computing federal taxable income on the U.S. Corporation Income Tax Return, provide the requested information. If a NOL resulted from a merger, enter the FEIN of the company generating the NOL prior to the merger date.
 FEIN _____
 (If there are NOLs for more than one year, enclose a schedule for each year with the information requested in Section C.)

D If Pass-Through Entity Withholding is claimed, enter the number of Schedules VK-1 and complete and enclose Schedule 500ADJ, Page 2. **D** _____

E Has your federal income tax liability been redetermined with the IRS and finalized for any prior year(s) that has not previously been reported to the Department? If yes, provide the year(s).
 Year **E** _____
 Year _____
 Year _____

F Location of corporation's books 5200 HAMPTON BLVD NORFOLK, VA 23508
 Contact for corporation's books BERTEL SCHMIDT Contact phone number 757-889-9400

2017 Virginia Form 500

Page 2

FEIN 54-0843118



INCOME

1. Federal taxable income (from enclosed federal return)	1.	NONE	.00
2. Total additions from Schedule 500ADJ, Section A, Line 7	2.		.00
3. Total (add Lines 1 and 2)	3.	NONE	.00
4. Total subtractions from Schedule 500ADJ, Section B, Line 10	4.		.00
5. Balance (subtract Line 4 from Line 3)	5.	NONE	.00
6. Savings and Loan Association's Bad Debt Deduction (see Instructions)	6.		.00
7. Virginia taxable income (subtract Line 6 from Line 5)	7.	NONE	.00

TAX COMPUTATION

8. Multistate Corporation - If business conducted within and without Virginia (Multistate Corporation), enclose Schedule 500A and complete Lines 8(a) through 8(d). If entire business conducted in Virginia, skip to Line 9.			
(a) Income subject to Virginia tax from Schedule 500A, Section B, Line 3(j)	8(a).		.00
(b) Apportionment factor percentage from Schedule 500A, Section B, Line 1 or Line 2(g)	8(b).		%
(c) Nonapportionable investment function income from Schedule 500A, Section B, Line 3(c)	8(c).		.00
(d) Nonapportionable investment function loss from Schedule 500A, Section B, Line 3(e)	8(d).		.00
9. Income tax [6% of Line 7 or 6% of Line 8(a)]	9.	NONE	.00

PAYMENTS AND CREDITS

10. Nonrefundable tax credits: Enter the amount from Schedule 500CR, Section 2, Part 1, Line 1B	10.		.00
11. Adjusted corporate tax (subtract Line 10 from Line 9)	11.	NONE	.00
12. 2017 estimated Virginia income tax payments including overpayment credit from 2016	12.		.00
13. Extension payment	13.		.00
14. Refundable tax credits from Schedule 500CR, Section 4, Part 1, Line 1A	14.		.00
15. Pass-through entity total withholding from Schedule 500ADJ, Section D	15.		.00
16. Total payments and credits (add Lines 12 through 15)	16.		.00

REFUND OR TAX DUE

17. Tax owed (if Line 11 is greater than Line 16, subtract Line 16 from Line 11)	17.	NONE	.00
18. Penalty (see Instructions)	18.		.00
19. Interest (see Instructions)	19.		.00
20. Additional charge from Form 500C, Line 17 (enclose Form 500C)	20.		.00
21. Total due (add Lines 17 through 20)	21.	NONE	.00
22. Overpayment (if Line 16 is greater than Line 11, subtract Line 11 from Line 16)	22.		.00
23. Amount to be credited to 2018 estimated tax	23.		.00
24. Amount to be refunded (subtract Line 23 from Line 22)	24.		.00

I, the undersigned president, vice-president, treasurer, assistant treasurer, chief accounting officer, or other officer duly authorized to act on behalf of the corporation for which this return is made, declare under the penalties provided by law that this return (including any accompanying schedules and statements) has been examined by me and is, to the best of my knowledge and belief, a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the income tax laws of the Commonwealth of Virginia. If prepared by a person other than the taxpayer, this declaration is based on all information of which he or she has any knowledge.

Date	Signature of Officer	Title
		PRESIDENT & CEO
Printed Name of Officer		Phone Number
BERTEL SCHMIDT		757-889-9400
Print Preparer's Name and Firm Name		Preparer Phone Number
JAMES E PRINCE, III BDO USA, LLP		757 640-7190
Date	Individual or Firm, Signature of Preparer	Address of Preparer
		150 BOUSH STREET, SUITE 1100 NORFOLK, VA 23510
Preparer's FEIN, PTIN, or SSN		Approved Vendor Code
13-5381590		1062

IMPORTANT: INCLUDE A COPY OF YOUR FEDERAL RETURN WITH THIS RETURN.

**2017 Virginia
Schedule 500FED**

**Schedule of Federal
Line Items**



Enclose Schedule 500FED with your Virginia Corporation Income Tax Return, Form 500.

Schedule 500FED does not replace the requirement to enclose a complete federal Form 1120 with your Virginia return.

Name as shown on Virginia return HAMPTON ROADS EDUCATIONAL FEIN 54-0843118

Form 1120 - Deductions and Taxable Income

1. Domestic Production Activities Deduction	1.	<u>.00</u>
2. Federal Taxable Income before NOL and Special Deductions	2.	<u>-388,016.00</u>
3. Net Operating Loss Deduction	3.	<u>.00</u>
4. Special Deductions	4.	<u>.00</u>
5. Federal Taxable Income after NOL and Special Deductions	5.	<u>-388,016.00</u>

Form 1120, Schedule C - Dividends and Special Deductions

6. Subpart F Income	6.	<u>.00</u>
7. Foreign Dividend Gross-Up	7.	<u>.00</u>

Form 1120, Schedule K or M-3

8. Tax Exempt Interest	8.	<u>.00</u>
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Form 5884 - Work Opportunity Credit

9. Salaries and Wages not deducted due to the WOTC	9.	<u>.00</u>
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Form 4562 - Special Depreciation Allowance and Other Depreciation

10. Special depreciation allowance for qualified property placed in service during the taxable year	10.	<u>.00</u>
11. Property subject to 168(f)(1) election	11.	<u>.00</u>
12. Other depreciation	12.	<u>.00</u>

Form 1118, Schedule A - Income or Loss Before Adjustments - Gross Income or Loss

13. Total: Deemed Dividends (Exclude Gross-Up)	13.	<u>.00</u>
14. Total: Deemed Dividend (Gross-up)	14.	<u>.00</u>
15. Total: Other Dividends (Exclude Gross-up)	15.	<u>.00</u>
16. Total: Other Dividends (Gross-up)	16.	<u>.00</u>
17. Total: Interest	17.	<u>.00</u>
18. Total: Gross Rents, Royalties, and License Fees	18.	<u>.00</u>
19. Total: Gross Income from Performance of Services	19.	<u>.00</u>
20. Total: Other	20.	<u>.00</u>
21. Total: Total Gross Income or Loss from Outside the US	21.	<u>.00</u>

Form 1118, Schedule A - Income or Loss Before Adjustments - Deductions

22. Total: Definitely Allocable - Rental, Royalty, and Licensing Expenses - Depreciation, Depletion, and Amortization	22.	<u>.00</u>
23. Total: Definitely Allocable - Rental, Royalty, and Licensing Expenses - Other Expenses	23.	<u>.00</u>
24. Total: Definitely Allocable - Expenses Related to Gross Income from Performance of Services	24.	<u>.00</u>
25. Total: Definitely Allocable - Other Definitely Allocable Deductions	25.	<u>.00</u>
26. Total: Total Definitely Allocable Deductions	26.	<u>.00</u>
27. Total: Apportioned Share of Deductions not Definitely Allocable	27.	<u>.00</u>
28. Total: Net Operating Loss Deduction	28.	<u>.00</u>
29. Total: Total Deductions	29.	<u>.00</u>

Form 1118, Schedule A - Income or Loss Before Adjustments - Total Income

30. Total: Total Income or (Loss) Before Adjustments	30.	<u>.00</u>
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