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Form 990

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

Open to Public

OMB No 1545-0047

Department of the Treasury

A For the 2008 calendar year, or tax year beginning 7/1/2008	, and e		6/30/2	nno				
	theck if applicable Please C Name of organization Arlington Education Association D Employer identification number							
use IRS	use IRS							
Name change print or Number and street (or P O box if mail is not delivered to street	d address) Ba	om/suite	E Telephone nur	mhar				
type.								
Termination See Specific Specific City or town, state or country, and ZIP + 4	<u>[10</u>	· · · · ·	<u>(703) 379-1650</u>	J				
Instruc- City of town, state of Country, and 21F + 4	22044		C C					
Amended return tions. Falls Church VA	22041	, .	G Gross receipts					
Application pending F Name and address of principal officer			his a group return fo					
Shelley Lucke-Jennings 4904 Wakefield Chapel Road, Anna	andale, VA 22	H(b) Are	e all affiliates include	ed? X Yes No				
I Tax-exempt status	527		If "No," attach a list	(see instructions)				
J Website: ▶ www aeava org		H(c) Gr	oup exemption num	her >				
K Type of organization		r of forma						
	IL Tea	- Oi TOTTIIA	1001	M State of legal domicile VA				
	0							
Briefly describe the organization's mission or most significant activities								
educate, and engage the Arlington Education Association (AEA) me	mbers and to i	utineuc	e education sta	keholders				
through collective action								
2 Check this box ▶ ☐ if the organization discontinued its operation	s or disposed o	of more	than 25% of its	assets.				
Number of voting members of the governing body (Part VI, line 1a)			<u></u>	3 0				
4 Number of independent voting members of the governing body (Part	VI, line 1b)			0				
through collective action Check this box if the organization discontinued its operation. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary)			_ !	5 0				
			_ 6	·				
7a Total gross unrelated business revenue from Part VIII, line 12, colum	n (C)		<u>_7</u>	a 0				
b Net unrelated business taxable income from Form 990-T, line 34	·····		7	b 0				
			Prior Year	Current Year				
8 Contributions and grants (Part VIII, line 1h).			331,1	76 363,981				
9 Program service revenue (Part VIII, line 2g)			11,30	0 0 68 5,588				
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Otherwise (Part VIII, column (A), lines 3, 4, and 7d)								
The Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11				0 0				
12 Total revenue–add lines 8 through 11 (must equal Part VIII, column	(A), line 12)	<u> </u>	342,5	44 369,569				
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)				0 0				
14 Benefits paid to of tournertibers (Paul IX, column (A), line 4)			<u>.</u>	0 0				
15 Salaries, other compensation, employee the nefits (Part IX, column (A	s), lines 5–10)		229,4	37 236,319				
16a Professional fundraising fees (Part X, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25)			<u> </u>	0 0				
b Total fundralsing expenses (Part IX, column (D), line 25)	0							
Other expenses than IX, column (A), lines 11a-11d, 111-24t)			<u> </u>	0 159,602				
18 Total expenses Attaines 17 must equal Part IX, column (A), lin	e 25)		229,43	37 395,921				
19 Revenue less expenses Subtract fine 18 from line 12			113,10	07 -26,352				
\$ 20 Tatal access (Port V. Inno 40)		Be	ginning of Year	End of Year				
방음 20 Total assets (Part X, line 16)			506,80					
ସ୍ଥଳ 21 Total liabilities (Part X, line 26)			34,58					
		l	472,2	13 444,361				
Part II Signature Block								
Under penalties of perjury, I declare that I have examined this return, including account and belief, it is true, correct, and confiplete. Declaration of preparer (other than office	ompanying schedu	les and st	atements, and to th	e best of my knowledge				
and schol, and that, something season of preparer (other trial office	er) is based on all i	mormado	ii oi wilich preparer	nas any knowledge				
And In Lund Almounes			I Ma	W 13,2010				
Sign Signature of officer			Date	15,200				
Here hefteg Lucke Jenning	.5		Date	•				
Type or print name and title								
Preparer's Date	Tor	neck if	Pre	eparer's identifying number				
Paid signature	se		(se	e instructions)				
Preparer's 5/	12/2010 em	ployed	<u> </u>	5/4/1/25				
Use Only Firm's name (or yours if self-employed), Timothy O'Brien, CPA			EIN > 34	-1773499				
address, and ZIP + 4 P O Box 2851, Fairfax, VA 22031				03)448-1040				
May the IRS discuss this return with the preparer shown above? (see instruction	ns)			. X Yes No				

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. (HTA)

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			_			
d	Other program services	(Describe in Schedule O)				
	, -	(Describe in Schedule O) 0 including grants of	\$	0)(Revenue \$	0)	
	, -	0 including grants of	\$ 395,921	0) (Revenue \$ (Must equal Part IX, L		
	(Expenses \$	0 including grants of				Form 990 (2008

Pai	rt 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)? If "Yes,"			
	complete Schedule A	1 1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3		 		
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		v
	·	-3-		Х
4			ŀ	
	Part II	4		
5	(1)(1)			
	and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	-'		-^-
•	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
3	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
		_ !		.,
	complete Schedule D, Part IV	9		X
10	• • • • • • • • • • • • • • • • • • • •	10		<u> </u>
11	• • • • • • • • • • • • • • • • • • • •			
	Parts VI, VIII, IX, or X as applicable	11	X	
12				
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		_X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
15		1112		
••	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		
10	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	40		v
47	·	16		X
17 40		17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		_X_
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_ <u>X</u> _
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete		ľ	
	Schedule J	23		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? If "Yes," answer questions		- 1	
	24b–24d and complete Schedule K If "No," go to question 25	24a	_	_X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		_X
d	Did the organization act as an "on behalf of' issuer for bonds outstanding at any time during the year?	24d		$\frac{\lambda}{X}$
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			<u> </u>
	disqualified person during the year? If "Yes," complete Schedule L, Part I	250		
h		25a	\rightarrow	
IJ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified		ı	
20	person from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
.=	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	1		
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Х

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV			_ X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		_x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 .	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable . 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b	_X_	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	ì		
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	_		
	this return?	3a		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			1
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			ĺ
	Regarding Prohibited Tax Shelter Transaction? .	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	ľ		
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			1
	\$75? .	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ĺ	1	1
	required to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			ĺ
_	required?	<u>7h</u>		 -,
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			ز ن
a	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			!
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			,
11	Section 501(c)(12) organizations. Enter	ł		i
a	Gross income from members or shareholders Cross income from ethor sources (Do not not amounts due or not to other sources)	- 1		i
b	Gross income from other sources (Do not net amounts due or paid to other sources	j		
120	against amounts due or received from them) Section 4947(a)(4) non exempt charitable truste le the executation filing Form 000 in liquid Form 10412	l		ر ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<u>_b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			ٔ ۔ ۔ ۔ ۔

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions Enter the number of voting members of the governing body ol 0 Enter the number of voting members that are independent. 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the pnor Form 990 was filed? 4 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 X Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a Х X Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? . . 8a Each committee with authority to act on behalf of the governing body? 8b Does the organization have local chapters, branches, or affiliates? 9a If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9b 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 Х 10 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at 11 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies No 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 Х 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? Х 13 13 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? 15a Other officers or key employees of the organization? 15b Х Describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X . . 16a If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure ► VA 17 List the states with which a copy of this Form 990 is required to be filed 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website X Upon request Own website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization:

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Arlington Education Association

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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 the organization did not compe	ensate any office	er, dire	ecto	or, t	rus	tee, o	r ke	ey employee		
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director		_		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Shelley Lucke-Jennings President	40			X	х			126,725	0	1,491
	0							0	0	(
	0							0	0	,
	0							0	0	(
	0							0	0	(
	0							0	0	C
	0							0	0	
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Advantan	Education	Association
Animuton	Education	ASSOCIATION

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	(A)	(B)	,	000,		C)	,		(D)	(E)		F)
	Name and title	Average hours per week	or director		(chec Officer	Key employee	Highest compensated employee	_	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amo ot compe fron organ and r	nated unt of her insation in the iization elated zations
		0							0	o		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
		0							0	0		0
<u>1b</u>	Total							•	126,725	0		1,491
2	Total number of individuals (including those organization ► 1	ın 1a) who rece	ived i	more	tha	n \$1	00,00	00 in	reportable com	pensation from t	he	
3	Did the organization list any former officer, of employee on line 1a? <i>If</i> "Yes," complete Sch	nedule J for sucl	h ındı	vidu	al					3	Yes	No X
4	For any individual listed on line 1a, is the sur the organization and related organizations gundividual											X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Yes											X
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest com- compensation from the organization	pensated indep	ende	nt co	ontra	ctor	s tha	t rec	eived more than	\$100,000 of	-	
	(A) Name and business a	ddress							(B) Description of serv	ices C	(C) ompensat	ion
												0
												0
—												0
_				-			 					<u>0</u>
2	Total number of independent contractors (incompensation from the organization		1) w	no re	ceiv	ed m	nore	than	\$100,000 in			

Par	t VIII	Statement of Revenue						<u> </u>
!					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
क्ष क	1a	Federated campaigns	1a	0				
	b	Membership dues	1b	354,536			}	
£, €	C	Fundraising events	. 1c	0			1	
ifs ra	ď	Related organizations	1d	0				
5,8	l e	Government grants (contributions)	. 1e	0				
Sin		All other contributions, gifts, grants,					1	
ig ig	'	similar amounts not included above	1f	9,445				
ặᇴ	۱ "	Noncash contributions included in lir		0				1
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a–1f	ies ια-ιι Ψ		363,981		İ	
	 "	Total. Add lines 1a-11	·	Business Code	303,901			
Program Service Revenue	2a				0			
Ş.	b				0			
8	ء ا				0			
Ž	ا ا				0			
Š	u		• • • • • • • • • • • • • • • • • • • •		0			
Ē		All other program on the review			0			
õ	' '		•	L	0		-	
	9	Total. Add lines 2a–2f	•	• •			-	
	3	Investment income (including divide	nds, interest, an	d			1	ł
		other similar amounts)			5,588			-
	4	Income from investment of tax-exem	npt bond procee	ds. ►	0			
	5	Royalties .	·	<u> </u>	_0			
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	b	Less rental expenses .					1	ļ
	С	Rental income or (loss)	0	0				
	d	Net rental income or (loss)		<u> </u>	0			
	7a	Gross amount from sales of	(ı) Secunties	(II) Other				
		assets other than inventory	0	0			1	
	b	Less cost or other basis				•	[
		and sales expenses	0					
	С	Gain or (loss) .	0	0				
	d	Net gain or (loss)		•	0			
4	8a	Gross income from fundraising						
renue		events (not including \$	0					
		of contributions reported on line 1c)						
æ	!	See Part IV, line 18	a	l o				
e	ь	Less. direct expenses .	b	0				
Other Rev	С	Net income or (loss) from fundraising	g events	•	Ō	-		
•	9a	Gross income from gaming activities	5					
	ŀ	See Part IV, line 19 .	a	l o				:
	b	Less direct expenses	. b	0				ĺ
	C	Net income or (loss) from gaming ac	ctivities .	•	0			
	10a	Gross sales of inventory, less						
		returns and allowances	. а	l o				
	Ь	Less: cost of goods sold	b	0				
		Net income or (loss) from sales of in			o			
		Miscellaneous Revenue	· · · · · · · · · · · · · · · · · · ·	Business Code				
	11a				- 0			<u> </u>
	b				0			1
	С				0			
	d	All other revenue			0		1	
	е	Total. Add lines 11a–11d		. ▶	0			
	12	Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c,	-		-		
		9c, 10c, and 11e		>	369,569	o	І о	l 0

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) but are not req	ulred to complete	Columns (B), (C), an	iu (D).
	not include amounts reported on lines 6b, 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 governments and				
	organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in				
	the U.S See Part IV, line 22	ol			1
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	ol		j	
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	128,215	128,215		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		·		
	persons described in section 4958(c)(3)(B)	ol			
7	Other salaries and wages	86,978	86,978		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	o			
9	Other employee benefits	14,121	14,121		
10	Payroll taxes	7,005	7,005		
11	Fees for services (non-employees)				
а	Management	ol		1	
b	Legal	0			·
C	Accounting .	1,750	1,750		- · · · · · · · · · · · · · · · · · · ·
d	Lobbying	0	.,,		
e	Professional fundraising services See Part IV, line 17	Ö			
f	Investment management fees .	0			_
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	9,237	9,237		-
14	Information technology	11,397	11,397		
15	Royalties	0	11,007		
16	Occupancy .	32,156	32,156		
17	Travel	95	95		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	٥			
19	Conferences, conventions, and meetings	83,681	83,681		
20	Interest	03,001	00,001		
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0		-	<u> </u>
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together			1	
	and labeled miscellaneous may not exceed			}	
	5% of total expenses shown on line 25 below)]		!
а		15,659	15,659		
b	Mombar European	3,138	3,138		
c	Repairs and Maintenance	2,489	2,489		
d	i	2,469	2,408		
e		0			
f	All other expenses	0		-	
25	Total functional expenses. Add lines 1 through 24f	395,921	395,921	0	0
		383,821	393,921		
26	Joint Costs. Check here ▶ if following	İ			
	SOP 98-2 Complete this line only if the organization		1		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising		i		
	solicitation .	i			

	art X	Balance Sneet			T - · · · · · · · · · · · · · · · · · · 		
			(A) Beginning of year		End	(B) s of year	
	1	Cash-non-interest-bearing	20	1		<u> </u>	20
	2	Savings and temporary cash investments	154,905	2		12	5,003
	3	Pledges and grants receivable, net	0	3			0
	4	Accounts receivable, net .	1,767	4			1,767
	5	Receivables from current and former officers, directors, trustees, key	1,101	_			1,101
	•	employees, or other related parties Complete Part II of Schedule L	0	5			0
	6	Receivables from other disqualified persons (as defined under section			<u> </u>		
	"	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete					
		Part II of Schedule L	0	6	ŀ		0
ø	_	Notes and loans receivable, net		7			0
set	7	· · · · · · · · · · · · · · · · · · ·		8			
Assets	8 9	Inventones for sale or use Prepaid expenses and deferred charges		9			
-	_	· · · · · · · · · · · · · · · · · · ·		3			
	10a						
	D	Less: accumulated depreciation Complete Part VI of Schedule D . 10b 0		40-			0.400
	44		350,109		ļ		50,109
	11	Investments—publicly traded securities .	0	11	 		0
	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		14	ļ		
	15	Other assets See Part IV, line 11	0	15	ļ		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	506,801	16			6,899
	17	Accounts payable and accrued expenses	34,588	_		3	32,53 <u>8</u>
	18	Grants payable		18	<u> </u>		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities .	0	20	ļ		0
ies	21	Escrow account liability Complete Part IV of Schedule D		21	ļ		
Liabilities	22	Payables to current and former officers, directors, trustees, key					
iab		employees, highest compensated employees, and disqualified					
_		persons Complete Part II of Schedule L	0	22	<u> </u>		0
	23	Secured mortgages and notes payable to unrelated third parties	0	23			0
	24	Unsecured notes and loans payable .	0	24			0
	25	Other liabilities Complete Part X of Schedule D	0	25			0
	26	Total liabilities. Add lines 17 through 25	34,588	26		3	2,538
		Organizations that follow SFAS 117, check here ▶ ☐ and					
alances		complete lines 27 through 29, and lines 33 and 34.			İ		
lan	27	Unrestricted net assets		27			
Ba	28	Temporarily restricted net assets .		28			
ב	29	Permanently restricted net assets		29			
or Fund B		Organizations that do not follow SFAS 117, check here ► X					
ō		and complete lines 30 through 34.					
ध	30	Capital stock or trust principal, or current funds		20			
Net Assets		Paid-in or capital surplus, or land, building, or equipment fund		30 31			
¥	31	,	470.040		ļ	4.4	4 204
é	32	Retained earnings, endowment, accumulated income, or other funds	472,213				4,361
_	33	Total net assets or fund balances .	472,213				4,361
Pa	34 rt XI	Total liabilities and net assets/fund balances Financial Statements and Reporting	506,801	34	<u></u>	4/	6,899
ια	ILAI	Financial Statements and Reporting				Yes	No
1	Ar	counting method used to prepare the Form 990 Cash X Accrus	al Other			1.03	
2		ere the organization's financial statements compiled or reviewed by an indep			2a	X	
		ere the organization's financial statements complied of reviewed by an independent account		•	2b		X
		Yes" to lines 2a or 2b, does the organization have a committee that assume:		aht of		 	
•		dit, review, or compilation of its financial statements and selection of an inde		grit OI		X	
38		a result of a federal award, was the organization required to undergo an aud					
36		e Single Audit Act and OMB Circular A-133?	ait or audits as set totill It	•	2-		v
		Yes," did the organization undergo the required audit or audits?	•		3a		X
	, 11	res, did the organization undergo the required addit of addits?			3b	<u> </u>	_ ^

SCHEDULE D (Form 990)

Supplemental Financial Statements

20**08**

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Arling	ton Education Association		54-0633921
Par		or Advised Funds or Other Similar F	Funds or Accounts. Complete if
	the organization answered "Yes" t	o Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year) .		
4	Aggregate value at end of year	· ·	
5	Did the organization inform all donors and de	onor advisors in writing that the assets he	ld in donor advised
	funds are the organization's property, subject	t to the organization's exclusive legal con-	trol? . Yes No
6	Did the organization inform all grantees, dor	ors, and donor advisors in writing that gra	int funds may be
	used only for charitable purposes and not fo	r the benefit of the donor or donor advisor	or other
	impermissible private benefit?		Yes No
Par	Conservation Easements. Comp	lete if the organization answered "Yes	s" to Form 990, Part IV, line 7.
		•	
1	Purpose(s) of conservation easements held	· · · · · · · · · · · · · · · · · · ·	a of an brokensally income at least and
	Preservation of land for public use (e g		n of an historically important land area
	Protection of natural habitat	Preservatio	n of certified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization hel	d a qualified conservation contribution in t	he form of a conservation easement
	on the last day of the tax year		
			Held at the End of the Year
а	Total number of conservation easements .		2a
b	Total acreage restricted by conservation eas	sements	2b
С	Number of conservation easements on a cer	rtified historic structure included in (a)	2c
d	Number of conservation easements included	d in (c) acquired after 8/17/06	. 2d
3	Number of conservation easements modified		erminated by the organization
	during the taxable 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, inspecti	on, violations, and
	enforcement of the conservation easements	it holds?	. Yes No
6	Staff or volunteer hours devoted to monitoring	ng, inspecting, and enforcing easements d	luring the year
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing easements duri	ng the year ►\$
8	Does each conservation easement reported	on line 2(d) above satisfy the requirement	ts of section
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No
9	In Part XIV, describe how the organization re	eports conservation easements in its revei	nue and expense statement, and
	balance sheet, and include, if applicable, the	e text of the footnote to the organization's f	financial statements that describes
	the organization's accounting for conservation	on easements	
Par	III Organizations Maintaining Collection	ons of Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted und	er SEAS 116, not to report in its revenue s	statement and halance sheet works of
	art, historical treasures, or other similar asse	•	
	service, provide, in Part XIV, the text of the f		
b	If the organization elected, as permitted und	er SFAS 116, to report in its revenue state	ement and balance sheet works of art.
-	historical treasures, or other similar assets h		
	service, provide the following amounts relatii		,
	(i) Revenues included in Form 990, Part VIII	-	▶ €
		i, iii ie i	> \$
2	(ii) Assets included in Form 990, Part X.	art historical transuras as other circles	poots for financial gain, mayinds the
2	If the organization received or held works of		ssets for illianicial gain, provide the
_	following amounts required to be reported un	-	. ¢
a	Revenues included in Form 990, Part VIII, III	IC 1.	ν Φ
b	Assets included in Form 990, Part X .	• •	₽ ₽

Arlington Education Association		54-0633921	n 9
Schedule D (Form 990) 2008 Part VII Investments—Other Securities	s. See Form 990, Part X, I	line 12.	Page
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
Financial derivatives and other financial products .	0		
Closely-held equity interests .	0		
Other	0		
	0		
	0		
	0		
	0		
	0		
	0	 	
	0		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)	0		
Part VIII Investments—Program Relate		line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valu	ation
	` '	Cost or end-of-year ma	arket value
	0		
	0		
	0		
	0	 	
	0		 · , , _,,
	0		
	0		
	0		
Total (Column (b) should equal Form 990, Part X, col. (B) line 13.)	0		· · · · · · · · · · · · · · · · · · ·
Part IX Other Assets. See Form 990, P	art X line 15		
	a) Description		(b) Book value
			0
			0
			0
			0
			0
			0
			0
- 11 (O)			0
Total. (Column (b) should equal Form 990, Part X, Part X Other Liabilities. See Form 990		<u></u>	0
Other Liabilities. See Form 990 (a) Description of liability	(b) Amount		
Federal income taxes	(b) Amount	0	
	······································	o	
		0	
		0	
	· · · · · · · · · · · · · · · · · · ·	<u>0</u>	
	·	<u>0</u>	
		0	

Total. (Column (b) should equal Form 990, Part X, ∞ (B) line 25)

In Part XIV, 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

Sched	ule D (Form 990) 2008			Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 99	0 to Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	369,569
2	Total expenses (Form 990, Part IX, column (A), line 25)	•	2	395,921
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	-26,352
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities .	•	5	
6	investment expenses		6	
7	Prior period adjustments	•	7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4–8		9	(
10	Excess or (deficit) for the year per financial statements. Combine lines 3	and 9	10	-26,352
Par	t XII Reconciliation of Revenue per Audited Financial State	ements With Revenue	e per F	Return
1	Total revenue, gains, and other support per audited financial statements	3	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a]
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		20	e (
3	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		40	:](
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I,	line 12)	5	
Par	t XIII Reconciliation of Expenses per Audited Financial Sta	tements With Expens	es pe	r Return
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Losses reported on Form 990, Part IX, line 25	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		26	•
3	Subtract line 2e from line 1 .		3	(
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b	_1	
С	Add lines 4a and 4b		40	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part l	I, line 18)	5	
Par	XIV Supplemental Information	·		· '
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, an 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Par		4, Part	IV, lines 1b
	•••••••••••••••••••••••••••••••••••••••		•••••	
· 	•••••••••••••••••••••••••••••••••••••••	•••••		
·				
		,		

	Arlington Education Association		54-0633921
Schedule D (Form	990) 2008		Page 5
Part XIV	Supplemental Information (continue	<u>a) </u>	
			• • • • • • • • • • • • • • • • • • • •
			•
		***************************************	•

		•••••	

		••••••	
			• • • • • • • • • • • • • • • • • • • •
		•••••	
	•••••		
		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

omb No 1545-0047

de he Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

Arlıngton Education Association	54-0633921
	••••••
	••••••

	•••••
······	
<u> </u>	
•	
	• • • • • • • • • • • • • • • • • • • •

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

	Cash	Non Cash
Federated Campaigns		1
Membership dues	354,536	2
Fundraising events		3
Related organizations		4
Government grants (contributions)		5
All other contributions, gifts, grants, and similar amounts not included above		
NEA TOO Campaign Grant	5,000	
VEA Benefit Grant	1,800	
VEA Membership Grant	2,645	
Other contributions total	9,445	6 0
7 Total	363,981	7 0

Part X. Line 4 (990) - Accounts Receivable

		Accounts red	eivable	Allowance for dou	btful accounts
		Beginning	End	Beginning	End
1 Accounts Receivable	1 [1,767	1,767		
	2				
}	3				
	4				
,	5				
)	6				
,	7				
}	8				
,	9				
0	10				
1 Total accounts receivable	11	1,767	1,767	0	0

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

									350,109	0	0	0	350,109	350,109
				Leasehold	ļ		Check If	Check If		Beginning	Ending			
							Investment	Asset	Cost/Other	Accumulated	Accumulated	Disposals/	Beginning	Ending
	Category or Item	Land	Buildings	ments	Equipment	Other	Asset	Disposed	Basis	Depreciation	Depreciation	Adjustments	Bafance	Balance *
1	Building		×						350,109	0			350,109	350,109
2									0	0			0	0
3									0	0			0	0
4									0	0			0	0
သ									0	0			0	0
9									0	0			0	0
_									0	0			0	0
∞									0	0			0	0
6									0	0			0	0
10									0	0			0	0
11									0	0			0	0
12									0	0			0	0
13									0	0			0	0
14									0	. 0			0	0
15									0	0			0	0
16									0	0			0	0
17									0	0			0	0
18									0	0			0	0
19									0	0			0	0
20									0	0			0	0