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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)

OMB No 1545-0047 2008

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

	For th	e 2008 calen	dar year,	or tax year beginning Sep 1	, 2008,	and endir	ng Aug			, 2009		
В	Check i	f applicable	Please use	C Name of organization				D Employ	er Iden	itification Nu	mber	
	Ad	dress change	IRS label	Portland Education Ass				01-	346	260		
	∐ Na	me change	or print or type. See	Number and street (or P O, box if mail is n	ot delivered to street ac	tdr) Room/s	uite	E Telepho	ne nun	nber		
	lnı	tial return	specific	29 Christopher Toppi D	rive			(20	7) 8	374-82	20	
	Те	rmination	Instruc- tions.	City, town or country	State	ZIP code + 4	.					
	An	nended return	İ	South Portland	ME	04106		G Gross r	eceipts	\$ 430	,144.	
	∏ AF	plication pending	F Name	and address of principal officer:			H(a) is this	a group retur	n for at	ffiliates?	Yes	X No
	_		Kathleer	Casasa 20 David Road Por	tland ME	S 04102-171	H(b) Are all				Yes	No
ī	Tax	-exempt statu			4947(a)(1) or	527	IT NO,	attach a list	(see ir	istructions)		
J		bsite: P po			· · · · · · · · · · · · · · · · · · ·		H(c) Group	exemption n	ımber	▶		
ĸ		of organization	X Corpor		► L	Year of Forma					le ME	
Pa	rt l 🐧	Summa										
	1	Briefly descri	be the or	ganization's mission or most signific	ant activities: Th	ne orga	nizati	on is	a 10	ocal		
a		teachers										
Governance												
Ĕ										- 		
Ņ	2	Check this bo	ox ► 🔲	if the organization discontinued its	perations or disp	osed of me	ore than 2	5% of its	asset	ts.		
8				bers of the governing body (Part VI					3_	64		
Activities &				nt voting members of the governing					4	60		
¥				yees (Part V, line 2a)					_	13		
Act.				eers (estimate if necessary)			• •		6	50		
'	/a	Not i pross	KERGE	pusiness revenue from Part VIII, lines taxable income from Form 990-T, I	ine 24		••••		7a 7b	+		0.
		A 0	2 Dusinos	Seasone in Sign Form 990-1, 1	ine 34					+		
		2 . 8	e IAAl	Be Mathvill Fine 1h)				rior Year			rrent Yea	
en en								445,9	980.	ļ	429,	702.
/en							··		107	 		442
Revenue	10	Other		art VIII column (A), lines 3, 4, and 7 III column (A), lines 5, 6d, 8c, 9c, 1	/d)		·	·	197.	\		442.
	11 12	Total ravenu	E TENTA	mescolumn (A), lines 5, 60, 80, 90, 1	UC, and Tie)			446,4	177	┼──	430,	144
—				nes 8 through 11 (must equal Part)								
	13			ounts paid (Part IX, column (A), line			·	1,.	340.	-		750.
				members (Part IX, column (A), line						 		
89				nsation, employee benefits (Part IX,	• •	5 5-10)	•	26,	/38.	 	27,	047.
Expenses	16a	Professional	fundraisii	ng fees (Part IX, column (A), line 11	e)	•• ••		550 M	41 = 3	\$1 7 58 5 44. 7		4-82
X	b	Total fundrag	sing expe	nses (Part IX, column (D), line 25)			1.4	<u> </u>	7.713	A TO THE WAY		****
ш	17	Other expens	ses (Part	IX, column (A), lines 11a-11d, 11f-2	4f)			429,3	330.		404,	833.
	18	Total expens	es. Add I	nes 13-17 (must equal Part IX, colu	mn (A), line 25).	.,		457,4	108.		433,	630.
	19	Revenue less	s expense	s. Subtract line 18 from line 12 .		· •		-10,	931.			486.
8								nning of			d of Yea	
Assets 1 Balanc	20	Total assets	(Part X. I	ıne 16)			.	82,		<u> </u>		806.
A B	21			, line 26)						1		
F.	22		•	ances. Subtract line 21 from line 20			_	82,	292	1	78	806.
Pa	rt II		ure Blo				_}	<u> </u>		<u>. L</u>		300.
					ding accompanies ====	odules and at	atemente an	d to the best	of must	mowledge c	nd belief d	
		true, correct,	and complete	I declare that I have examined this return, inclue Declaration of preparer (other than officer) is t	based on all information	of which prep	parer has any	knowledge	OI IIIY F	inowieuge ai	u beller, it	15
Sig	าก	► ALA	11000	-MILLOUAL			1	Tin	21	2010		
He	re	Signature	of officer	1			D	ate	<u> </u>	2010		
	-	P. Kath	loon C	SSSS ALAAKAN T C	horal	100	asure	,				
			rint name ar		NEV M		am e	<i>X</i>				
				<u> </u>		Date	——————————————————————————————————————		Т	Preparer's in	entifying n	umber
Pa	id					Dute	l s	Check if self-		(séé instruct	ons)´	
ra Pro		Preparer's signature	> -	- a alask	Ì	09/00/0	l l	employed	` 니			
	rer's			a C. Clark		01/13/	LU _					
Üs		Firm's name of	` ——	RK, FRIEL AND JOYCE, P.	A							
On	ıly	employed), address, and	· ——	AUBURN ST				EIN >				
		ZIP + 4	POF	TLAND	ME 0410	03-2145		Phone no	(20		7-274	<u>6</u>
Ma	y the	IRS discuss ti	hıs return	with the preparer shown above? (see	ee instructions)	<u> </u>				X Y	es	No
BA	A Fo	r Privacy Act	and Pape	rwork Reduction Act Notice, see th	e separate instru	ctions.		TEEA010	1 04/2	23/09 F	orm 990	(2008

	1990 (2008) Portland Education Association	01-0346260	Page 2
Pai	† III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission:		
	The organization is a local		
	teachers association.		
	Did the graphyption undertake any constraint program acquires during the user which were not listed on the		
2			E
	Form 990 or 990-EZ?	<u> </u> Ye	s 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 service	es?, Ye	s X No
	If 'Yes,' describe these changes on Schedule O.	<u>. </u>	_
4	Describe the exempt purpose achievements for each of the organization's three largest program services by	v expenses. Section 5	01(c)(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a	llocations to others, t	he total
	expenses, and revenue, if any, for each program service reported.		
Α.	a (Code:) (Expenses \$ including grants of \$) (f	Povonuo 6	`
40			
	The organization is a local teachers association.		
			
		·	
41	b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
			
			·
			.
			.
			
			-
	a (Code)	Powerus A	
4	c (Code:) (Expenses \$ including grants of \$) (revenue \$,
			-
		. 	.
		. 	
		 	
		-	
			- -
		. 	-
	d Other assessment (December in Catality Co.)		
4	d Other program services (Describe in Schedule O)	_	
	(Expenses \$ including grants of \$) (Revenue \$)
4	e Total program service expenses ► \$ (Must equal Part IX, Line 25, column (t	3))	

	·		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		x
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part I	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice 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
	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 X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		x
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable.	11	x	
12	Did the organization receive an audited financial statement for the year for which it is completing this return 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
14 a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	<u> </u>	х
t	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	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II.</i>	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16_		x
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	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		X
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		X
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		x
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K If 'No, 'go to question 25	24a		x
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	_
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
d	any tax-exempt bonds? I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24c 24d		
			\vdash	
	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a	_	
	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified 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	<u> </u>	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27	- 000	X_

Form 990 (2008) Portland Education Association

Part 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:	,		, i
ā	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	28a		X
ł	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		<u>x</u>
(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		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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		x
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		x
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 VI.	37_		x
BAA		Forr	n 990	(2008)

TEEA0104 12/18/08

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. 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?. 1 c X 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 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Х Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q. . . . 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 **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 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 guestion 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . 5с 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 deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7 a X b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с Х d If 'Yes,' indicate the number of Forms 8282 filed during the year . . . X e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? x f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 a h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h 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 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make any 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 10 a 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: a Gross income from other members or shareholders . . . 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 五层额 12b BAA Form 990 (2008) Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

sec	tion A.	Governing i	воцу an	o Mana	gement									
	For each	'Yes' response es, or changes in	to lines 2- Schedule	7b below,	and for a 'i	No' respon	se to lines 8	or 9b below,			ırcumstances		Yes	No
1 a	Enter the	number of voting	ng membe	rs of the	governing b	ody			1a	64	·	_		250
b	Enter the	number of voti	ng membe	ers that ar	e independe	ent			1b	60		_		, 溪南
2	Did any officer, d	officer, director, lirector, trustee c	trustee, or or key emp	key empoloyee? .	loyee have			a business r			any other	2		<u>x</u>
3	Did the o	organization dele rs, directors or tr	egate contr	rol over m	anagement lovees to a	duties cus manageme	tomarily per	formed by or or other pers	under on?	the direc	t supervision	3		x
4	Did the d	organization mak	ke any sigr	nificant ch								4		х
_		prior Form 990							٠. ٠		•	_		
5		organization become		-	-		liversion of t	ne organizatio	on's a	ssets?		5		<u> </u>
6		organization ha							•			6	Х	
	governin						_					7a		x
b	Are any	decisions of the	governing	body sub	ject to appr	roval by me	embers, stoc	kholders, or c	ther p	persons?		7b	ļ	X
8	Did the o	organization conf wing:	temporane	ously doo	ument the r	meetings h	eld or writte	n actions und	ertake	en during	the year by			
а	The gove	erning body? .										8a	x	
b	Each cor	mmittee with aut	thority to a	ct on beh	alf of the go	overning bo	ody?					. 8b	X	
9 a	Does the	organization ha	ave local c	hapters, t	oranches, or	affiliates?						9a		<u> </u>
ŧ	If 'Yes,' and bran	does the organizations to ensure t	zation have their opera	e written pations are	oolicies and consistent	procedure with those	s governing of the orgar	the activities	of suc	ch chapte	rs, affiliates,	9Ь		
10	Was a co	opy of the Form in Schedule O t	990 provid	ded to the s, if any,	organizatio the organiza	n's govern ation uses	ing body bet to review the	ore it was file Form 990	d? Al	l organiza	ations must	10		x
11	Is there organiza	any officer, direction's mailing ad	ctor or trus	stee, or ke 'Yes,' pro	ey employee	e listed in F	Part VII, Sec	tion A, who ca Schedule O	annot	be reach	ed at the	11		x
	tion B.				,							k	·	
		-				•							Yes	No
12 a	Does the	organization ha	ave a writte	en conflic	t of interest	policy? If	'No,' go to li	ne 13				12a	х	
t	Are offic to conflic	ers, directors or cts?	trustees,	and key e	mployees re	equired to	disclose anr	ually interest	s that	could giv	re rise	12b	x	
C	Does the Schedule	e organization re e O how this is o	gularly an done.	d consiste	ently monito ·	r and enfo	rce compliar	nce with the p	olicy?	If 'Yes,'	describe in	12c	x	
13	Does the	e organization ha	ave a writt	en whistle	blower poli	cy?						13	x	
14	Does the	e organization ha	ave a writt	en docum	ent retentio	n and dest	ruction polic	y?				14	ļ	X
15	Did the persons,	process for deter comparability d	rmining co lata, and c	mpensati ontempor	on of the fol aneous sub	llowing per stantiation	sons include of the delib	e a review and eration and di	d appr ecisioi	oval by II	ndependent		1 6	
a	The orga	anization's CEO,	Executive	Director,	or top man	agement o	fficial? .					15 a		<u> </u>
t		ficers of key emp	-	_		•	•					15 b		<u> </u>
	Describe	the process in	Schedule	O. (see in	structions)								M N	
16 a	Did the	organization inve												
	•	iring the year?										16a	 -	X
t	ir 'Yes,' יוח joint v status w	has the organiza enture arrangen ith respect to su	ation adop ments unde ich arrange	ted a writ er applica ements?	ten policy o ble federal	r procedure tax law, an	e requiring t id taken ster	ne organizations to safeguar	n to e d the	evaluate i organiza	ts participation tion's exempt	n 16b		لتآتا
Sec		Disclosures				· · ·	,	······	·		· · · · · · · · · · · · · · · · · · ·	,	<u>-</u> .	•
		states with which		f this For	m 990 is red	quired to be	e filed >							
		6104 requires ar on. Indicate how				•								
	Own	website	And	ther's we	bsite	X Up	on request							
19	Describe statemen	e in Schedule O nts available to t	whether (a	and if so,	how) the or	ganızatıon	makes its g	overning docu	ıment	s, conflic	t of interest p	olicy, a	nd fina	ancial
20	State the	e name, physica	ıl address,	and telep	hone numb	er of the p	erson who p	ossesses the	book	s and rec	ords of the or	ganıza	tion	
ı	Audre	y_Cabral		_4_ Ry	an Road,	<u>.</u>	Saco,	1	ME_	04072	<u> (</u>	207)_	284-	8646
ВАА	· - · · · · · · · · · · · · · · · · · ·											Form	990	(2008)

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

- 1 a 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) or 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 compensate any officer, director, trustee, or key employee.										
(A)	(A) (B) (c)					(D)	(E)	(F)		
Name and Title	Average hours		tion (check	all t	hat appl	y)	Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	adivich ਕੀ frustee or director	aatsmi lenoilulisut	Offi-er	Key amployee	High est coiกฮุซารอted employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Kathleen Casasa		_			_					
President	1.00			x				6,287.	0.	0.
Kathy St. Clair										
Vice President	1.00			X				2,514.	0.	0.
Audrey Cabral										
Treasurer	1.00			x				2,514.	0.	0.
Joni Beliveau										
Secretary	1.00			x				2,514.	0.	0.
Peg Hillman										
Media Education	1.00	x			_			500.	0.	0.
Roxanne Montgomery										
Greivance Chair	1.00	х			_			2,652.	0.	0.
Karen Peltola										
Membership	1.00	х					_	1,047.	0.	0.
Deb Tucker-Small					l					
Ed Tech Vice President	1.00	x	ļ	<u> </u>	<u> </u>		<u> </u>	349.	0.	0.
Laurie Kurthy					1		1			
Ed Tech Secretary	1.00	Х			ļ			349.	0.	0.
Catherine Ferguson								ĺ		
Ed Tech President	1.00	X			_		ļ	1,676.	0.	0.
Mary Jo Keenan		ļ	İ							
Social Chair	1.00	х	ļ		ļ	ļ	<u> </u>	922.	0.	0.
Maryann McKinnon									_	_
Ed Tech Chair Negotiator	1.00	X		<u> </u>		 	-	349.	0.	0.
Gary Vines										
Chair Negotiator	1.00	X	ļ	-	-	ļ	├	3,494.	0.	0.
		 	1	\vdash	\vdash	 	+			
						ļ				

Part VII Section A. Officers, Directors, Trust	tees, K	(ey	Em	ıplo	ye	es,	and	d Highest Con	pensated Emp	oloyees (cont.)
(A)	(B)			(0	c)			(D)	(E)	(F)
Name and Title	Average hours	_		_				Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
	 		-			_				
	•									
	-									
		<u> </u>		-	t		-			-
					ļ					
	•				<u>.</u>					
	-									
	-									
	-									
	1									
	-									
1 b Total	1	1	<u> </u>	l	<u> </u>		<u> </u>	25,167.	0.	. 0.
2 Total number of individuals (including those in 1a)	who rec	eivei	d m	ore 1	than	\$10	00,0		<u> </u>	'
organization										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	ndıvıdua	aL		٠.				• •		3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t individual	portable han \$15	50,00	00,5	If 'Y	'es'	com	plet	er compensation e Schedule J for	from such	4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci	ompens	satio J for	n fr	om a	any erso	unre n	elate	ed organization fo	r services	5 X
Section B. Independent Contractors										
 Complete this table for your five highest compensation from the organization. 	ted inde	pen	den	t cor	ntrac	ctors	s tha	at received more t	han \$100,000 of	
(A) Name and business address	ss							Description) of Services	(C) Compensation
							_			
2 Total number of independent contractors (including compensation from the organization	those ii	n 1)	who	o rec	ceive	ed m	nore	than \$100,000 in	Žies:	

e Total. Add lines 11a-11d

10c, and 11e

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c

430,144

442

0.

12.

0

ر آروجي

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 required to complete columns (B), (C), and (D).

Do 1	not include amounts reported on lines 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 governments and organizations in the U.S. See Part IV, line 21		<u> </u>		** ** **
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,750.		\$ 1.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45° \$ 2.45	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			· · · · · · · · · · · · · · · · · · ·	v & '
5	Compensation of current officers, directors, trustees, and key employees	25,167.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,880.			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	1,095.			
d	Lobbying				
е	Prof fundraising svcs See Part IV, In 17		· who was the sa	没有, 5% 做透	
f	Investment management fees .				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology			<u> </u>	
15	Royalties				· · · · · · · · · · · · · · · · · · ·
16	Occupancy			† · · · · · · · · · · · · · · · · · · ·	
17	• •	· · · · · · · · · · · · · · · · · · ·			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,502.			
20	Interest				
21	Payments to affiliates	335,880.			
22	Depreciation, depletion, and amortization	376.			
23	Insurance	500.			
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below).				
9	Supplies	126.			8 / N N N N N N N N N N N N N N N N N N
	Miscellaneous	402.	<u> </u>		
	Release time benefits	55,154.			
	Retirement	798.	<u> </u>		
	. V. C. T. EMETT	/ / / / / / / / / / / / / / / / / / / /			
f	All other expenses				<u> </u>
	Total functional expenses. Add lines 1 through 24f	422 620			
26		433,630.			
20	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2008)

			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	2,419.	1	2,696.
	2	Savings and temporary cash investments	78,933.	2	75,547.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees,			
	_	or other related parties. Complete Part II of Schedule L		5	. 20
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
A	l _	and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
A S E T S	7	Notes and loans receivable, net		7	
E	8	Inventories for sale or use		8	
S	9	Prepaid expenses and deferred charges		9	
		Land, buildings, and equipment: cost basis 10a 4,272.		145	
	b	Less: accumulated depreciation Complete Part VI of	2 × 1 × 1 × 1 × 1 × 1	· · · · · · · · · · · · · · · · · · ·	
		Schedule D	940.	10 c	563.
	11	Investments — publicly-traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets Add lines 1 through 15 (must equal line 34)	82,292.	16	78,806.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
L	20	Tax-exempt bond liabilities		20	
AB	21	Escrow account liability. Complete Part IV of Schedule D		21	
L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			(2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
†				- Tab T - 18	
E S		of Schedule L		22	
S	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
N E T		Organizations that follow SFAS 117, check here ► X and complete lines		. di	
T .		27 through 29 and lines 33 and 34.	5. 4		
Ş	27	Unrestricted net assets	67,472.	_	63,710.
Ę	28	Temporarily restricted net assets	14,820.	28	15,096.
\$	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
DZC		lines 30 through 34.		Z** **	
В	30	Capital stock or trust principal, or current funds		30	
B	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
BALAZCES	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ë	33	Total net assets or fund balances.	82,292.	33	78,806.
	34	Total liabilities and net assets/fund balances	82,292.	34	78,806.
Pa	ırt X	Financial Statements and Reporting			
		_			Yes No
1	Ace	counting method used to prepare the Form 990: 🕱 Cash 📗 Accrual 📗	Other		1934 Jak 184 1
2	a We	re the organization's financial statements compiled or reviewed by an independent	accountant?		. 2a X
		re the organization's financial statements audited by an independent accountant?			2b X
		Yes' to 2a or 2b, does the organization have a committee that assumes responsibilities, or compilation of its financial statements and selection of an independent according to the compilation of the financial statements and selection of an independent according to the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilation of the compilatio	ity for oversight of the a	audit,	
					2c X
3	a As Δ	a result of a federal award, was the organization required to undergo an audit or a dit Act and OMB Circular A-133?		Singl	
		You I did the assessment a understate a second and I a		•	3a X
BA		res, did the organization undergo the required audit or audits?	·····	-	Form 990 (2008

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

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, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Employer Identification number

	tland Education Association		01-0346260
Par		r Advised Funds or Other Similar Fur	nds or Accounts Complete if
	the organization answered 'Yes'	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 do funds are the organization's property, subject	nor advisors in writing that the assets held in d to the organization's exclusive legal control?	onor advised Yes No
6		ors, and donor advisors in writing that grant fun the benefit of the donor or donor advisor or oth	ds may be ner Yes No
'Par		ete if the organization answered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held b	y the organization (check all that apply).	
	Preservation of land for public use (e.g.,	recreation or pleasure) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of certified historic structure
	Preservation of open space	-	
2	Complete lines 2a-2d if the organization held of the tax year.	a qualified conservation contribution in the form	m of a conservation easement on the last day
			Held at the End of the Year
ā	Total number of conservation easements.		2a
t	Total acreage restricted by conservation ease	ements	2b
C	Number of conservation easements on a cert	ified historic structure included in (a) .	2c
C	Number of conservation easements included	ın (c) acquired after 8/17/06.	2d
3	Number of conservation easements modified, year ►	transferred, released, extinguished, or termina	ated by the organization during the taxable
4	Number of states where property subject to c	onservation easement is located ►	
5	Does the organization have a written policy re enforcement of the conservation easement it	egarding the periodic monitoring, inspection, vi holds?	olations, and Yes No
6	Staff or volunteer hours devoted to monitorin	g, inspecting, and enforcing easements during	the year ►
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing easements during the	year ► \$
8		on line 2(d) above satisfy the requirements of si	ection Yes No
9	In Part XIV, describe how the organization re include, if applicable, the text of the footnote conservation easements.	ports conservation easements in its revenue ai to the organization's financial statements that	nd expense statement, and balance sheet, and describes the organization's accounting for
Par	Complete if the organization ans	ections of Art, Historical Treasures, o swered 'Yes' to Form 990, Part IV, line	r Other Similar Assets 8.
1 a	If the organization elected, as permitted unde treasures, or other similar assets held for put the text of the footnote to its financial statem	er SFAS 116, not to report in its revenue staten plic exhibition, education, or research in further ients that describes these items.	nent and balance sheet works of art, historical ance of public service, provide, in Part XIV,
t	treasures, or other similar assets held for put amounts relating to these items:	er SFAS 116, not to report in its revenue staten olic exhibition, education, or research in further	nent and balance sheet works of art, historical ance of public service, provide the following
	(i) Revenues included in Form 990, Part VIII		. >\$
	amounts required to be reported under SFAS		•
ā	Revenues included in Form 990, Part VIII, lin	e 1	► \$

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 Port1 Part III Organizations Maintai					r Other	01-0346 Similar Asso		Page 2
Using the organization's accessio that apply):								
a Public exhibition			d 🗆 Loop or	avahansa araara				
 			e Other	exchange programs				
b Scholarly research c Preservation for future genera	ations		e 🗆 Other					
4 Provide a description of the organ Part XIV.		ctions ar	nd explain how	hey further the organ	nization's	exempt purpos	e in	
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or r ather than to b	eceive di se mainta	onations of art, ained as part of	historical treasures, of the organization's co	or other s llection?	ımılar [Yes	No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arra an amount	ngeme	ents Complet n 990, Part >	e if organization	answer	ed 'Yes' to F	orm 990	, Part
1a Is the organization an agent, trus included on Form 990, Part X?		_			her assets	s not r		
						Į	Yes	∐ No
b If 'Yes,' explain the arrangement	in Part XIV ar	id compl	ete the following	table.				
						 	Amount	
c Beginning balance .				• • •	<u>1c</u>			
d Additions during the year .	•	•			1 d	<u> </u>		
e Distributions during the year				••••	1e			
f Ending balance	•	•		• • • • • • • • • • • • • • • • • • • •	. <u>1f</u>	<u> </u>		
2a Did the organization include an a		n 990, P	art X, line 21?				Yes	∐ No
b If 'Yes,' explain the arrangement								
Part Va Endowment Funds Co	mplete if or	ganızat	ion answered	I 'Yes' to Form 9	90, Part	: IV, line 10.		
	(a) Current y	ear	(b) Prior year	(c) Two years bad	k (d)	Three years back	(e) Four	years back
1 a Beginning of year balance			**************************************		\$1) Y	" WARE	, ,	经 多数公正
b Contributions			· \$	· · · · · · · · · · · · · · · · · · ·	3	1.50		
c Investment earnings or losses					ķ.,	- ,432	J	1, 1,2,500
d Grants or scholarships		,		镇.一心深智	1 × × × × × × × × × × × × × × × × × × ×		2 / /	5 13X
e Other expenditures for facilities		- 5		18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.75%	* 5.	
and programs .		<u> </u>	<u> </u>		· *		155 17 8	8 (200
f Administrative expenses .				\$ \$\mathbb{p} \text{2.5} \text{3.5} \text{4.5}		· * * * * * * * * * * * * * * * * * * *	1	. 表示 意 处
g End of year balance .					<u>:</u> `.\	3 3 3 3 3 3		1,286.3
2 Provide the estimated percentage	e of the year e	nd balar	ice held as:					
a Board designated or quasi-endown	vment 🟲		%					
b Permanent endowment ▶	%							
c Term endowment ►	*							
3a Are there endowment funds not a organization by:	in the possess	ion of the	e organization tl	nat are held and adm	ıınıstered	for the	Y	es No
(i) unrelated organizations							3a(i)	
(ii) related organizations						•	3a(ii)	
b If 'Yes' to 3a(ıı), are the related of							3b	
4 Describe in Part XIV the intended								
Part VI Investments—Land, B	uildings, ar	nd Equi	pment. See	Form 990, Part X	(, line 1	0.		
Description of investment	t		or other basis estment)	(b) Cost or other basis (other)	(c) D	epreciation	(d) Boo	k Value
1 a Land	. [1	e i jūksi		
b Buildings	[
c Leasehold improvements .	. [
d Equipment .	. [
e Other	「			4,272.		3,709.		563.
Total. Add lines 1a-1e (Column (d) she	ould equal For	m 990. F	Part X column (-		563.

TEEA3302 12/23/08

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Schedule **D** (Form 990) 2008

(a) Description of Liability	(b) Amount	
Federal Income Taxes		
Total. Column (b) Total (should equal Form 990, Part X, col. (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.

Schedule D (Form 990) 2008 Portland Education Association	1-0346260	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1 Total revenue (Form 990, Part VIII,column (A), line 12)		
2 Total expenses (Form 990, Part IX, column (A), line 25)		
3 Excess or (deficit) for the year Subtract line 2 from line 1		
4 Net unrealized gains (losses) on investments		
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments		
8 Other (Describe in Part XIV)		
9 Total adjustments (net) Add lines 4-8		
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9.		
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1 Total revenue, gains, and other support per audited financial statements	. 1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	No. of	
a Net unrealized gains on investments	1 4	
b Donated services and use of facilities		
c Recoveries of prior year grants	— , , ,	
d Other (Describe in Part XIV) 2d		
e Add lines 2a through 2d		
	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	— · ĭ	
	4c 5	
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		
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:	\$ 71	
a Donated services and use of facilities		
b Prior year adjustments	 	
c Losses reported on Form 990, Part IX, line 25	—[5 · · ·]	
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	. 2e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b		
5 Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5	
Part XIV		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b		
		-

Schedule D (Form 990) 2008 Portland Education Association	01-0346260	Page 5
Schedule D (Form 990) 2008 Portland Education Association Part XIV Supplemental Information (continued)		
		-
		- -
		- -
	· 	
	·	
		_
		

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Form 4562

Depreciation and Amortization (Including Information on Listed Property)

See separate instructions.

► Attach to your tax return.

OMB No 1545-0172

2008

Department of the Treasury Internal Revenue Service

Portland Education Association 01-0346260 Business or activity to which this form relates Form 990 / Form 990EZ 🖹 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I Maximum amount. See the instructions for a higher limit for certain businesses \$250,000. Total cost of section 179 property placed in service (see instructions) . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) \$800,000. Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1, If zero or less, enter -0-, If married filing separately, see instructions 6 (a) Description of property (C) Elected cost (b) Cost (business use only) Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7. 8 9 Tentative deduction Enter the smaller of line 5 or line 8... 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562. 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12. 13 Note: Do not use Part II or Part III below for listed property Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . 14 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions) 17 MACRS deductions for assets placed in service in tax years beginning before 2008 ... 17 376 38.5° N If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here. Section B — Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (a) (b) Month and (C) Basis for depreciation (d) (e) **(f)** (g) Depreciation Classification of property (business/investment use Recovery period Convention only - see instructions) in service * 19a 3-year property W 18 **b** 5-year property \$. D c 7-year property d 10-year property e 15-year property ٥ È f 20-year property ŵ g 25-year property 1 25 yrs S/L h Residential rental 27.5 yrs MM S/L property 27.5 yrs MM S/L i Nonresidential real MM S/L 39 yrs property MM S/L Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 小秦里 1900 20 a Class life S/L 20 1 3 m h h h b 12-year S/L 12 yrs c 40-year S/L 40 yrs MM Part V Summary (See instructions.) 21 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (o), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions 22 376

For assets shown above and placed in service during the current year, enter

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