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Department of the Treasury Internal Revenue Service

ENVELOPE POSTUIARK DATE MAR 0 2 2010

## **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)

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

OMB No 1545-0047 2008 Open to Public Inspection

_	Fan 4h a 200	O salandar	ear, or tax year beginning 10/01/08, and ending 9/	30/09	2		
				30703	<del></del>	D Empl	nuos idontification numbes
$\neg$	Check if applica	III A IRS	C Name of organization  Washington Restaurant As		-+i	D Emple	oyer identification number
∃′	Address change	label or		SSOCI	acron	1 01	0596363
ا 📙	Name change	print or	Doing Business As				-0586362
$\Box$	Initial return	type.	Number and street (or P O box if mail is not delivered to street address)		Room/suite		none number
Ħ		See Specific	510 Plum Street SE		200	360	0-956-7279
$\sqsubseteq$	Termination	Instruc-	City or town, state or country, and ZIP + 4			G Gross rec	eipts \$ 2,821,838
$\bigcup f$	Amended return	tions.	Olympia WA 98501			}	
$\Box$	Application pen	<sub>ding</sub> F Name	e and address of principal officer			H(a) Is this	a group return for
		· •				affiliat	
						H(b) Are all includ	l affiliates Yes No
						1	attach a list (see instructions)
	Tax-exempt	status X	501(c) ( <b>6</b> ) <b>4</b> (insert no ) 4947(a)(1) or 527			1	,
			vrahome.org			H(c) Groun	exemption number
	Type of organiz		poration Trust X Association Other	Π. \	rear of formation 1		M State of legal domicile WA
	art I	Summa	· · · · · · · · · · · · · · · · · · ·		real of formation -		W State of legal dofflicile
<u>. F</u>							
		•	he organization's mission or most significant activities:	Ab - 1.		_:	
8	1		n of the Restaurant Industry. WRA is the	-		•	•
ā	a	ssociat	ion representing the State of Washington's	hosp:	itality i	ndustry	7.
er							
Activities & Governance	2 Che	ck this box	if the organization discontinued its operations or disposed of more	re than 25	% of its assets.		
ಹ	3 Num	ber of voting	members of the governing body (Part VI, line 1a)			3	27
98	4 Num	ber of indep	endent voting members of the governing body (Part VI, line 1b)			4	27
Ϋ́Ε	5 Tota	I number of	employees (Part V, line 2a)	•		5	35
ĆĖ	6 Tota	I number of	volunteers (estimate if necessary)			6	200
) (	l		ated business revenue from Part VIII, line 12, column (C)	••	•	7a	901,107
) }	l	-	siness taxable income from Form 990-T, line 34	••	•	7b	483,061
	<b>D</b> (100)	di ii olatoo ba	shoot taxable meetic from our 1, into 04	1	Prior Y		Current Year
,	8 Conf	tributions and	d grants (Part VIII, line 1h)	ſ	1	1,437	2,500
Revenue	9 Proc	ram service	revenue (Part VIII, line 2g)		2,11	1,273	2,235,308
) ≅	_		ne (Part VIII, column (A), lines 3, 4, and 7d)	·		8,559	358,866
~	1		Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	Ì		8,249	216,781
	1	•	and lines 8 through 11 (must equal Part VIII, column (A), line 12)	ŀ		9,518	2,813,455
	<u> </u>		ar amounts paid (Part IX, column (A), lines 1-3)		3,20	<del>5</del> ,5±0	2,013,133
				- }			
		-	or for members (Part IX, column (A), line 4)	-	1 5 6	1 060	1 056 476
8		•	ompensation, employee benefits (Part IX, column (A), lines 5–10)		1,56	1,862	1,856,476
sesuec			draising fees (Part IX, column (A), line 11e)	}			<del></del>
Exp			expenses (Part IX, column (D), line 25)	}			1 105 000
ш	17 Othe	er expenses	(Part IX, column (A), lines 11a-11d, 11f-24f)			7,335	1,137,839
	18 Tota	l expenses	Add lines 13-17 (must equal Part IX, column (A), line 25 VED			9,197	2,994,315
		<u>enue less ex</u>	penses. Subtract line 18 from line 12			0,321	-180,860
Net Assets or Fund Balances			t V line 16)	}	Beginning		End of Year
sset	<b>20</b> Tota	•	t X, line 16) AR 0.9 2010			7,531	2,105,861
P P	<b>21</b> Tota	•	art X, line 26)			1,314	962,049
<u> </u>	22 Net		a bararress state as mile 21 month in to 20		1,31	6,217	1,143,812
<u>_P</u>	art II	Signatu	re Block OGDEN, UT				
		Under penal	ties of penjury, I declare that I have examined this return, including accompanying so	chedules ar	nd statements, and	to the best	of my knowledge
		and belief, it	is true, correct, and complete Declaration of preparer (other than officer) is based of	on all intom	nation of which pr	eparer has ar	ny knowledge
Sig	ın 📗						/19/10
He	re	Signatu	ire of officer			Date	
		An	thony Anton I	Presi	dent + <	<i>E0</i>	
		Type or	print name and title				
_			111 () 110. 611	Date	Check	r ıf	Preparer's identifying number
Pa	id l	Preparer's signature	Hay X / Wex (IT)	_	. ealf.	Г	(see instructions)
	eparer's	Signature		Z/1.	3/10 emplo	yed ▶ L	D00047392
	e Only	Firm's name	(or yours Siminski & Associates, P.S.			EIN	<u> </u>
<b>-</b> 5	,	ıf self-emplo				Phone	
		address, an				no 🕨	360-956-1040
May	the IRS di	ecuse this re	turn with the preparer shown above? (see instructions)				Yes   No

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

2,994,315 (Must equal Part IX, Line 25, column (B).)

4e Total program service expenses > \$

	The first of the f			
			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		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
	candidates for public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	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		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			ļ
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			l
	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
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			İ
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
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? If "Yes," complete Schedule F, Part II	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	<u> </u>	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	1	ĺ	
	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			ĺ
	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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	<u> </u>	
b	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	L	
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	L	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		X

			Yes	No
28	Dunng 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		ľ	
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		_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		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	1		
	Schedule N, Part II	32		X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		ļ	
	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-chantable 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_

Form **990** (2008)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		_		1		
4.	Fatastha asserted in Pay 2 of Form 1006, Applied Summary and Transmitted of					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	4.	12				
<b>h</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1a 1b	0				
C	Did the organization comply with backup withholding rules for reportable payments to vendors and report			-			
·	gaming (gambling) winnings to prize winners?	<b>ub</b> .0			1c	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	2a	35				
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?				2b	x	ĺ
-	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 b	<b>v</b>					
	this return?				3a	X	Ì
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	onty .		•			
	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 Bar	ık					
	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
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity						
	Regarding Prohibited Tax Shelter Transaction?				5c		
6a	Did the organization solicit any contributions that were not tax deductible?				6a	X	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or					
	gifts were not tax deductible?				6b	X	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	n			_	**	
_	\$75?			•	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	• •		-	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was						x
	required to file Form 8282?	ایدا	'		7c		^
a	If "Yes," indicate the number of Forms 8282 filed during the year	7d		<del>-</del> ···	1		
9	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a perso benefit contract?	mai			70		x
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7e 7f		X
,	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	•			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	- •	•		79		
	required?	,			7h		x
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	on.	•	- •	· · · · ·	<b></b>	
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor						
	organization, have excess business holdings at any time during the year?	9			8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		•	•			
a	Did the organization make any taxable distributions under section 4966?				9a	1	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	•		• •	9b		
10	Section 501(c)(7) organizations. Enter:	•	•	• •			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
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					-	
а	Gross income from members or shareholders	11a	L		]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			·			
	amounts due or received from them.)	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	41?			12a	<u> </u>	<u> </u>
<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 required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management				- 1	- 1	
	The second secon			ſ		Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the				1		
	circumstances, processes, or changes in Schedule O. See instructions		07		Į		
1a		1a	27 27		ł		
ь		1b	21				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			:		1	x
•	any other officer, director, trustee, or key employee?			-	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct				3		x
4	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 prior Form 990				4		X
4 5	Did the organization make any significant changes to its organizational documents since the prior Form 950.  Did the organization become aware during the year of a material diversion of the organization's assets?	was	illeu :	ł	5		X
6	Does the organization have members or stockholders?		•		6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	2	•	•	<u> </u>		
14	of the governing body?	•			7a	x	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	• •	•	•	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	-	- •				
•	the year by the following				į		
а	The governing body?				8a	x	
b	Each committee with authority to act on behalf of the governing body?			İ	8b	х	
9a	Does the organization have local chapters, branches, or affiliates?			·	9a	х	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapter	rs.	•				
	affiliates, and branches to ensure their operations are consistent with those of the organization?	•			9ь	X	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	tions		ľ			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached	d at		1			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				11		X
Sec	tion B. Policies						
						Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		•		12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	•					
	nse to conflicts?				12b		X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"						
	describe in Schedule O how this is done		•		12c	X	
13	Does the organization have a written whistleblower policy?				13	X	
14	Does the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review and approval by						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and deci	ision:			1		
а	The organization's CEO, Executive Director, or top management official?				15a	X	
b	Other officers or key employees of the organization?				15b	X	
	Describe the process in Schedule O. (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement						
	with a taxable entity during the year?				16a		X
b	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 safeguar	ď			1		
	the organization's exempt status with respect to such arrangements?				16b		L
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed None.	-					
18	Section 6104 requires an organization to make its Form 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.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	t of in	terest				
	policy, and financial statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books and reco		of the				
	organization: ▶ Washington Restaurant Association 512 Plum Stre	•	ÖEÖ1	. 260	٥É	· - · -	370
_0	lympia WA	<u> </u>	8501	360			279
					Form	1 990	(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

- 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.

(A) Name and Title	<b>(B)</b> Average	Posi	tion (	chack	C) call ti	hat ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
Name and mue	hours per week		Institutional trustee	Officer	Key employee	Highest compensated 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
See attached	schedule		-	x			,	-see affach	ed - o	(
•										
, .										
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	,									
······································						<u> </u>				
						<u> </u>				
			_			_	_			
						L				

Parl	VII ' Section A	. Officers, Directors, Trus	tees	, Ke	y En	plo	yees,	and	d Highest Compensated E	mployees (continued)	
	(A)	(B)	Posi	tion (4		C) all ti	nat ap	nlv)	(D)	(E)	(F)
	Name and title	Average hours per week	Individual trustee or director		Officer	Key employee	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
-											
										,	
					<u> </u>						
	· · · · · · · · · · · · · · · · · · ·										
•											•••
							L	Ļ			-
	Total .	uduals (including those in 1	2) 144		· ooiv		ooro i	ban	\$100,000 in reportable com	noncation from the	
	organization ▶ 1	viduals (including those in t	a) w	110 10	CCIV	cu ii	1016	ulall	T \$100,000 III Tepotable con	iperisation from the	
4	employee on line 1a For any individual lis the organization and individual Did any person listed	? If "Yes," complete Schedu ted on line 1a, is the sum of related organizations great d on line 1a receive or accin	ile J f repe er th	for s ortati an \$ ompe	uch i oie co 150, ensat	indiv ompe 0003 ion f	idual ensat ? If "Y from a	es,"			3 X 4 X 5 X
	ion B. Independent	the organization? If "Yes,"  Contractors	COIII	piete	SCI	eau	e J K	JI 5L	car person		5   X
1		for your five highest comper the organization.	nsate	ed in	depe	nde	nt co	ntrac	ctors that received more tha		
		(A) Name and business address			_			╁	Descrip	(B) ton of services	(C) Compensation
								-			
			•							, <u>, , , , , , , , , , , , , , , , , , ,</u>	
	Total number of inde	ependent contractors (includent the organization	ling t	hose	e in 1	) wt	no red	ceive	ed more than \$100,000 in		0
DAA											Form <b>990</b> (2008)

	rt V	III Statement of	Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts its	1a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
am,	C	Fundraising events	1c			Ŧ		
ള	d	Related organizations	1d			1	l	
S.E	е	Government grants (contributions	s) <b>1e</b>	2,500		1		
흥등	f	All other contributions, gifts, gran					•	
들읨		and similar amounts not included	above 1f			İ		
티	g	Noncash contributions included in	n lines 1a-1f \$			-		
$\overline{}$	h	Total. Add lines 1a-1f		<u> </u>	2,500			
Program Service Revenue				Busn. Code				
ě	2a	Membership Due	s		1,168,662	1,168,662		
e R	b	Retro Manageme	nt Fee	900099	720,180		720,180	<u>-</u>
اخ	С	Commrasions		900099	104,407		104,407	<del></del>
Sel	d	Chapter Events	- Spokane		92,422	92,422		
	е	Advertısınç		900099	76,520		76,520	
<u>S</u>	f	All other program service	e revenue	. L	73,117	73,117		
٩	g	Total. Add lines 2a-2f		<u> </u>	2,235,308			
	3	Investment income (incl	luding dividends	, interest, and				
		other similar amounts)		▶↓	358,059	99		357,960
	4	Income from investmen	t of tax-exempt	bond proceeds 🕨				
	5	Royalties	<del></del>					······································
			i) Real	(II) Personal		1	l	
	6a	Gross Rents	17,513					
	b	Less rental exps				i i		
	С	Rental inc or (loss)	17,513			1		
	d 7a	Net rental income or (lo		. ▶	17,513			17,513
		sales of assets	Secunties	(II) Other				
		other than inventory		9,190		1		
	b	Less cost or other				-		
1		basis & sales exps		8,383				
		Gain or (loss)	i	807	007	207		
	d	Net gain or (loss)	· . · r	<b>P</b>	807	807		
	8a	Gross income from fundrais	sing events				1	
ž.		(not including \$						
9,6		of contributions reported on		ŀ				
Other Revenue		See Part IV, line 18	a L					
the state		Less: direct expenses  Net income or (loss) fro	_ b _ 	vents				
0		Gross income from gaming		vents .				
	9a	See Part IV, line 19	_					
	, h	Less direct expenses	a _					
		Net income or (loss) fro		ities 🕨				
		Gross sales of inventor		ides				
	IVa	returns and allowances	·					
	, h	Less: cost of goods sold	· · -					
		Net income or (loss) fro	. <b>-</b>	ntory				
	۲	Miscellaneous		Busn. Code				
	11a			<del></del>	166,648	Ŧ		166,648
	b	Reimbursement-H			26,548			26,548
		Sales - Membersh			3,466			3,466
	d	All other revenue		l I	2,606	-194		2,800
		Total. Add lines 11a–11			199,268			=,000
	12	Total Revenue. Add lin	nes 1h 2n 3 4	5 6d 7d 8c				
	'*	9c, 10c, and 11e .		I	2,813,455	1,334,913	901,107	574,935
	Щ.	00, 100, and 116 .	<u> </u>	·	-,0-0,400			3. = 1,555

## 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).

	All other organizations must				
	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			•	
2	Grants and other assistance to individuals in		<del></del>		
-	the U.S. See Part IV, line 22			<b>[</b>	
3	Grants and other assistance to governments,				
3	organizations, and individuals outside the			•	
	U S See Part IV, lines 15 and 16			[	
A	Benefits paid to or for members		<del></del>		
4 5	Compensation of current officers, directors,	<del></del>	<del></del>		
Э				İ	
e	trustees, and key employees				
6	Compensation not included above, to disqualified			+	
	persons (as defined under section 4958(f)(1)) and	141 050	141 050		
_	persons described in section 4958(c)(3)(B)	141,250	141,250	+	
7	Other salanes and wages	1,400,727	1,400,727		
8	Pension plan contributions (include section 401(k)	<b>A</b> =	AB 45-		
	and section 403(b) employer contributions)	37,374	37,374		
9	Other employee benefits	148,122	148,122		··-
10	Payroll taxes	129,003	129,003		
11	Fees for services (non-employees):				
а	Management				
b	Legal .	27,915	27,915		
С	Accounting .	22,013	22,013		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	62,022	62,022		
17	Travel	37,126	37,126		
18	Payments of travel or entertainment expenses	.,===	,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	96,804	96,804		
20	Interest	58,541	58,541		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	105,952	105,952	<del></del>	
23	Insurance		200,002		
23	modulation .				
24	Other evnences Itemize evnences not	]			
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.)	166 005	166 005		
a	Lobbying Expenses	166,085	166,085		
b	Federal Income Tax	163,858	163,858		·
С	News Magazine Expense	79,847	79,847		
d	Chapter Events - All	58,867	58,867		<del> </del>
9	Marketing/Sponsorship Sta	55,650	55,650		
f		203,159	206,896	-3,737	<u></u>
25	Total functional expenses. Add lines 1 through 24f	2,994,315	2,998,052	-3,737	
26	Joint Costs. Check here				
	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				
					5 <b>990</b> (200

	art /	C Balance Sneet		·····					
					(A) Beginning of year		(B) End of		
	1	Cash—non-interest bearing			149,621	1		21,9	306
		- • • •		·  -	497,338	2		15,8	
	2	Savings and temporary cash investments		·	491,330		ļ	19,0	<del>)                                    </del>
	3	Pledges and grants receivable, net		.  -	8,436	3_	<del> </del>		
	4	Accounts receivable, net			8,436	_4			108
	5	Receivables from current and former officers, directors, tru		y					
		employees, or other related parties. Complete Part II of Sc		<u> </u>		5			
	6	Receivables from other disqualified persons (as defined un	nder secti	on					
		4958(f)(1)) and persons described in section 4958(c)(3)(B	). Comple	te					
		Part II of Schedule L				6_			
ţ	7	Notes and loans receivable, net				7			
Assets	8	Inventones for sale or use	•			8			
As	9	Prepaid expenses and deferred charges			460	9		1,0	070
•	10a	· ·	10a	2,170,932					
	ь	Less: accumulated depreciation Complete							
		Part VI of Schedule D	10b	624,373	1,599,615	10c	1,5	46.5	559
	11	Investments—publicly traded securities				11	<del> </del>	/-	
	12	Investments—other securities. See Part IV, line 11		· · -	11,000	_		11,0	າດດ
	13	Investments—program-related See Part IV, line 11		<del> </del>	11,000	13			<del>,,,,</del>
	14	Intangible assets	•	-	<del></del>	14			
				· -	41,061	_	<del> </del>	<u> </u>	322
	15	Other assets. See Part IV, line 11	•	<del> -</del>	2,307,531	15	2 1		
—	16	Total assets. Add lines 1 through 15 (must equal line 34)	•			16	2,1		
	17	Accounts payable and accrued expenses			38,718		<b>-</b>	9,0	<u> 689</u>
	18	Grants payable			10.000	18	<u> </u>		
	19	Deferred revenue		.  -	12,000	19	<u> </u>	16,	<u>/U/</u>
<b>10</b>	20	Tax-exempt bond liabilities		<u> </u>		20			
Liabilities	21	Escrow account liability Complete Part IV of Schedule D		<u>. [</u>		21	ļ		
Ē	22	Payables to current and former officers, directors, trustees	s, key						
jab		employees, highest compensated employees, and disqual	lified						
I		persons. Complete Part II of Schedule L				22			
	23	Secured mortgages and notes payable to unrelated third p	oarties .	. L	874,110	23	8:	21,0	<u> </u>
	24	Unsecured notes and loans payable				24			
	25	Other liabilities. Complete Part X of Schedule D			66,486	25	1	14,5	<b>554</b>
	26	Total liabilities. Add lines 17 through 25			991,314	26	9	62,0	149
S		Organizations that follow SFAS 117, check here	₹ and						•
nces		complete lines 27 through 29, and lines 33 and 34.	_						
<u>a</u>	27	Unrestricted net assets			1,316,217	27	1,1	43,1	312
Balaı	28	Temporarily restricted net assets		·		28			
D	29	Permanently restricted net assets		. [		29			
or Fund		Organizations that do not follow SFAS 117, check here	e ▶ .						
Ē		and complete lines 30 through 34.	٠ .						
	30	Capital stock or trust principal, or current funds			•	30			
Assets	31	Paid-in or capital surplus, or land, building, or equipment fi	ind	·		31			
SS	32	Retained earnings, endowment, accumulated income, or or		·· · ·		32			
Ϋ́	1	Total net assets or fund balances	outer turiu	°	1,316,217		1,1	43 1	212
Net	33	• •		· · -	2,307,531		2,1		
*****	34 art )	Total liabilities and net assets/fund balances  Financial Statements and Reporting	• •	<del></del>	2,301,331	34	2,1	<i>55</i> , (	301
<u>_</u> F	ail /	Financial Statements and Reporting		<del></del>	<del></del>			Yes	No
1	۸۵	counting method used to prepare the Form 990:	Cash [	Accrual  Oth	10F			162	
_			_				3.	$ \mathbf{x} $	ı
2		ere the organization's financial statements compiled or revie	-	•			. <u>2a</u>	<del></del>	X
		ere the organization's financial statements audited by an ind	•				. <u>2b</u>	<del>  </del>	
(		Yes" to lines 2a or 2b, does the organization have a commit		· · · · · · · · · · · · · · · · · · ·	=				ı
		e audit, review, or compilation of its financial statements and		•			2c	X	
3		a result of a federal award, was the organization required to	o undergo	an audit or audits as set f	rorm In				v
_		e Single Audit Act and OMB Circular A-133?				-	. <u>3a</u>	├──	X
	) If "	Yes," did the organization undergo the required audit or aud	iits /	<del></del>	<del> </del>	<u> </u>	. 3b	لہیا	

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

▶ 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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

	- o. die organisation	İ	pioye	i identingation nui	
W	ashington Restaurant Association		91-0	586362	
	Organizations Maintaining Donor Advised Furthe organization answered "Yes" to Form 990, F				
		(a) Donor advised funds	(b)	Funds and other acc	counts
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 donor advisors in writing that t	he assets held in donor advised			
	funds are the organization's property, subject to the organization's exclus	sive legal control?		Yes	☐ No
6	Did the organization inform all grantees, donors, and donor advisors in w	nting that grant funds may be		_	_
	used only for charitable purposes and not for the benefit of the donor or o	donor advisor or other			
	impermissible private benefit?			Yes	No_
Pa	art II Conservation Easements. Complete if the orga	anization answered "Yes" to Form	1990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check a	ll tha <u>t a</u> pply)			
	Preservation of land for public use (e g , recreation or pleasure)	Preservation of an historically imp	ortant land	l area	
	Protection of natural habitat	Preservation of certified historic st	tructure		
	Preservation of open space				
2	Complete lines 2a–2d if the organization held a qualified conservation co on the last day of the tax year.	ntribution in the form of a conservation eas	ement		
	, .		f	Held at the End	of the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		_
С	Number of conservation easements on a certified historic structure include	ded in (a)	2c		
d	Number of conservation easements included in (c) acquired after 8/17/06	• •	2d		
3	Number of conservation easements modified, transferred, released, extir	• • •	durina		
	the taxable year	, ,	J		
4	Number of states where property subject to conservation easement is loc	cated >			
5	Does the organization have a written policy regarding the periodic monitor				
	enforcement of the conservation easements it holds?	•		Yes	☐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing	easements during the year		<del></del>	_
7	Amount of expenses incurred in monitoring, inspecting, and enforcing ea	sements during the year > \$			
8	Does each conservation easement reported on line 2(d) above satisfy the				
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?	·		Yes	☐ No
9	In Part XIV, describe how the organization reports conservation easemer	nts in its revenue and expense statement, a	and		
	balance sheet, and include, if applicable, the text of the footnote to the or	ganization's financial statements that descri	nbes		
	the organization's accounting for conservation easements.				
Pa	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to		Similar <i>A</i>	Assets.	
1a	If the organization elected, as permitted under SFAS 116, not to report in art, historical treasures, or other similar assets held for public exhibition, provide, in Part XIV, the text of the footnote to its financial statements that	its revenue statement and balance sheet velocation, or research in furtherance of pu		Э,	
	If the organization elected, as permitted under SFAS 116, to report in its historical treasures, or other similar assets held for public exhibition, eduprovide the following amounts relating to these items:  (i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X	cation, or research in furtherance of public	service,	\$ \$	<del>-</del>
2	If the organization received or held works of art, historical treasures, or o		e u ie		
_	following amounts required to be reported under SFAS 116 relating to the	ese nems.		œ.	
a				*	
D	Assets included in Form 990, Part X		. •	<b>∌</b> — — −	

<u>Sche</u>		n Restaurant			86362	Page 2
Pa	rt III Organizations Maintaining	Collections of Art, I	<u> Historical Treas</u>	ures, or Other S	<u> Similar Asset</u>	s (continued)
3	Using the organization's accession and other ritems (check all that apply):	ecords, check any of the fo	ollowing that are a sig	nificant use of its coll	ection	
а	Public exhibition	d Loan o	or exchange program	ıs		
ь	Scholarly research	e Other	<b>0</b> . 0			
c	Preservation for future generations					
4	Provide a description of the organization's colle Part XIV	ections and explain how the	ey further the organiz	ation's exempt purpo	se ın	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	be maintained as part of the	e organization's colle	ction?	[	Yes No
Pa	rt IV Trust, Escrow and Custod				d "Yes" to Fo	rm 990,
	Part IV, line 9, or reported a					
1a	Is the organization an agent, trustee, custodial	n or other intermediary for o	contributions or other	assets not	г	
	included on Form 990, Part X?			•	l	Yes No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following t	able:			
						Amount
C	Beginning balance				1c	
d	Additions during the year				. 1d	
e	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on For	m 990, Part X, line 21?				Yes No
b	If "Yes," explain the arrangement in Part XIV					
Pa	rt V Endowment Funds. Comp	ete if organization ar	nswered "Yes" to	o Form 990, Par	t IV, line 10.	
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years ba	ack (e) Four years back
1a	Beginning of year balance .					
b	Contributions					
C	Investment earnings or losses					
đ	Grants or scholarships					
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the year	end balance held as:			·	
а	Board designated or quasi-endowment	%				
b	Permanent endowment   %					
C	Term endowment ▶ %					
3a	Are there endowment funds not in the possess	sion of the organization tha	t are held and admini	istered for the		
	organization by					Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations				• •	3a(ii)
b	If "Yes" to 3a(II), are the related organizations	listed as required on Scheo	dule R?		•	3b
4	Describe in Part XIV the intended uses of the	organization's endowment	funds.		·	
Pa	et VI Investments—Land, Build			), Part X, line 10	<u> </u>	
	Description of investment	(a) Cost or other basis	(b) Cost or ot		preciation	(d) Book value
		(investment)	basis (other	7)		
	Land		403	,000		403,000
	Buildings					
c	Leasehold improvements					
d	Equipment					
	Other		1,767	,932	624,373	1,143,559
	I. Add lines 1a-1e. (Column (d) should equal Fo	orm 990. Part X. column (B			•	1,546,559

Schedule D'(Form 990) 2008 Washington Restaurant	Association	91-0586362	Page 3
Part VII Investments—Other Securities. See Form 99			
(a) Description of security or category	(b) Book value	(c) Method of	valuation
(including name of security)		Cost or end-of-year	r market value
Financial derivatives and other financial products			<del> </del>
Closely-held equity interests		· <u> </u>	· · · · · · · · · · · · · · · · · · ·
Other			
			<del> </del>
	`		<del>- ·</del>
- <b>-</b>	·	<del></del>	<del></del>
	·	<del></del>	
_ <b> </b>		<del></del>	<del></del>
		<del></del>	
		· · · · · · · · · · · · · · · · · · ·	<del></del>
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)		· · · · · · · · · · · · · · · · · · ·	
Part VIII Investments—Program Related. See Form 99			
(a) Description of investment type	(b) Book value	(c) Method of	valuation.
(-,	(2, 255% 14.65	Cost or end-of-year	
	<del>- </del>		<u> </u>
		<u></u>	<del> </del>
	<del></del>		
<u></u>			
			<del></del>
		.,,	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)			······································
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description	<del></del>		(b) Book value
(a) Description			(b) book value
			<del></del>
****		· ·	
	<u> </u>		
· · · · · · · · · · · · · · · · · · ·	<del></del>		· · · · · · · · · · · · · · · · · · ·
		*****	
Title (O. ) (I) also all Farm 200 Part V and (D) has 45 \		<u> </u>	<u> </u>
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)	)E	<u> </u>	
Part X Other Liabilities. See Form 990, Part X, line 2			
(a) Description of liability	(b) Amount		
Federal income taxes	F0 006		
Accrued Choice Time	50,906		
Federal Income Tax Payable	45,108		
Security Deposit Payable	6,198		
401K Withholding Payable	4,535		
Payable to PAC	3,925		
Due to PAC 20% Major	2,557		
L&I Payable	556		
401K Loan Payable	326		
Supplemental Insurance Payable	245		
All Other	198		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)	114,554		
In Part XIV, provide the text of the footnote to the organization's financial state	ements that reports the organi	ization's liability for	

uncertain tax positions under FIN 48.

Sche	dule D (Form 990) 2008 Washington Restaurant Association	on 91-058636	2	Page <b>4</b>
Pa	rt Xi Reconciliation of Change in Net Assets from Form 990 to Fin	ancial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	• •	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		_ 3	
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	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements	With Revenue per Ret	urn	
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.	i		
а	Net unrealized gains on investments	la		
þ	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d	<b>j</b>	
9	Add lines 2a through 2d		2е	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	la		
b	Other (Describe in Part XIV)	<u>                                     </u>		
C	Add lines 4a and 4b		4c	
<u>5</u>	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)		5	
	rt XIII Reconciliation of Expenses per Audited Financial Statements	s With Expenses per R	eturr	<u> </u>
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.	i		
а	<del> </del>	<u>Pa</u>	-	
þ	· · · · · · · · · · · · · · · · · · ·	2b	-	
С	<del></del>	2c	-	
d		2d		
0	Add lines 2a through 2d		2e	***
3	Subtract line 2e from line 1	١.	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	The state of the s	la	-	
D	Other (Describe in Part XIV)	ן טי	ً _ ا	
	Add lines 4a and 4b  Total expanses Add lines 3 and 4a /This should equal Form 800. Bot I line 19 \	•	4c 5	
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)  If XIV Supplemental Information		<u> </u>	<u> </u>
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	and 4: Part IV lines 1h		
	tb; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b			
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Schedule D (F	orm 990) 20	08 <b>T</b>	Wash	ing	gtor	Re	est	au	ran	t	Ass	500	cia	ıti	on		91	L-0	586	362	2					Pag	e 5
Part XIV	Supple	menta	l Info	rmat	tion (	contin	ued)							-		_											
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## SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

## **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.

2008
Open to Public Inspection

Name of the organization

Washington Restaurant Association

Employer identification number 91-0586362

Form 990, Part III, Line 4d - All Other Achievements
Seminars, conventions and other benefits for promoting
the restaurant industry.
Form 990, Part VI, Line 6 - Classes of Members or Stockholders
Organized with members.
Form 990, Part VI, Line 7a - Election of Members and Their Rights
Members elect the board members/governing body on an annual basis.
Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Board and staff review conflicts of interest of staff and board members on
a periodic basis.
Form 990, Part VI, Line 15a - Compensation Process for Top Official
Executive Director's compensation is reviewed and approved by the board on
an annual basis.
Form 990, Part VI, Line 15b - Compensation Process for Officers
Upper management positions are also reviewed and approved by the board on
an annual basis.

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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► See separate instructions.

2008 Open to Public Inspection

Internal Revenue Service	Je Service	oce coparate mor			1	HISPECTION
Name of the organization	_				Employer I	Employer Identification number
	Washington Restaurant Association				91-0586362	6362
Part	Identification of Disregarded Entities					
	(A) Name, address, and EIN of disregarded entity	(B) Pnmary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
:						
:						
Part II	Identification of Related Tax-Exempt Organizations					
	(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
WRA Edu 510 Plu Olympia	WRA Education Foundation 510 Plum Street SE, #200 Olympia WA 98501	Promote Ed	WA	501(c)	ω	
	:					
:						

Schedule R (Form 990) 2008

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

91-0586362

Schedule R (Form 990) 2008 Washington Restaurant Association

Page 2 (J) General or Schedule R (Form 990) 2008 managing partner? Yes No Percentage ownership amount in box 20 of Schedule K-1 (Form 1065) Code V-UBI end-of-year assets Share of (H)
Disproportionate Yes No (G) Share of end-of-year Share of total income assets (F) Share of total income Type of entity (C corp, S corp, or trust) income (related, (E) Predominant (D)
Direct controlling investment, unrelated) identification of Related Organizations Taxable as a Corporation or Trust (D)
Direct controlling entity Legal domicile foreign country) Identification of Related Organizations Taxable as a Partnership (state or (C)
Legal
domicile
(state or
foreign Primary activity (B) Primary activity Name, address, and EIN of related organization (A)
Name, address, and EIN of
related organization : Part IV Part III δĄ

Washington Restaurant Associ	Fransactions With Related Organizations
le R (Form 990) 2008	Transaction
Schedule R (	Part V

chedule R (Form 990) 2008 Washington Restaurant Association 91-0586362		
I≅		′, ;
Note. Complete line 1 if any entity is listed in Parts II, III, or IV		Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a X
<b>b</b> Gift, grant, or capital contribution to other organization(s)		1b 🗙
c Gift, grant, or capital contribution from other organization(s)		10
<b>d</b> Loans or loan guarantees to or for other organization(s)		1d X
e Loans or loan guarantees by other organization(s)		1e X
f Sale of assets to other organization(s)		1f X
g Purchase of assets from other organization(s)	:	1g X
		14 X
i Lease of facilities, equipment, or other assets to other organization(s)		1i X
i Leses of facilities equinment or other sessits from other organization(s)		=======================================
J Lease of facilities, equipment, of outer assets from outer organization (s)		-
m Change of facilities comment mailing lets or other secate		
n Shanng or paid employees	٠	
o Reimbursement paid to other organization for expenses	·	10 T
<ul> <li>q Other transfer of cash or property to other organization(s)</li> <li>r Other transfer of cash or property from other organization(s)</li> </ul>		11 X X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	nsaction thresholds.	
(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)		
(2)		
(3)		
(4)		:
(5)		
(0)		Schedule R (Form 990) 2008

Schedule R (Form 990) 2008 Washington Restaurant Association

tion 91-0586362

Page 4

Unrelated Organizations Taxable as a Partnership

Part VI

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

(A) (B) (B) (C)	(B)	(c)	<u> </u>	(E)	(F)	(9)	E)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3)	Share of end-of-year assets	Disproportionate allocations?	Code V—UBI amount in box 20 of Schedule K-1	General or managing partner?
			organizations?		Yes	(Form 1065)	Yes
			<del></del>				
					-		
						Schedule R (F	Schedule R (Form 990) 2008

(9) (10) Totals

WRA 02/13/2010 9 23 AM						
Forms 990 / 990-PF	Mort	gages and Otl	ner Notes Payable	)		2008
	For calendar year 2008, or	r tax year beginning	10/01/08 , and e	ending 9	/30/09	
Name					Employer Ide	ntification Number
Washington Res	staurant Assoc	iation			91-058	6362
washing con Rec	Juana Hoboc.	<u> </u>	<del></del>	<del></del>	91 030	0302
Form 990, Part	X, Line 23 -	Additional	Information		<u> </u>	
(1) Thurston Fir	Name of lender	<del></del> -	Rela	tionship to dis	qualified person	<u> </u>
(2)	.oc bank		<del></del>			
(3)						
(4)						
(5)						
(6)	<u>.</u>			<u> </u>		<del></del>
(7) (8)		-				
(9)				<del></del>	_	· · · · ·
(10)						
			-	***************************************		·····
Onginal amount borrowed	Date of loan	Matunty date	Pana	ment terms		Interest
(1)	Date of loan	uale	Nepay	ment terms	<del></del>	rate
(2)						
(3)						
(4)					<del></del> -	
(5)						
(6) (7)	<del></del>					
(8)						
(9)						
(10)						
			1			
Sec	cunty provided by borrower			Purpose o	of loan	
(1)	carry provided by borrower			T dipose (	or loan	
(2)						
(3)						
(4)					<u>-</u> .	
(5) (6)	· · · · · · · · · · · · · · · · · · ·					
(7)			***************************************			
(8)		•				
(9)						
(10)						
<u></u>		·····	<u> </u>		<u> </u>	
Considera	ation furnished by lender		Balance due a beginning of ye			lance due at end of year
(1)			874,	110		821,099
(2)						
(3)					<del> </del>	
(4)			<del>-</del>	<del></del>	<del> </del>	<del></del>
(5) (6)			<del>                                     </del>		<del> </del>	<del></del>
(7)			<del>                                     </del>		<del> </del>	<del></del>
(8)						

821,099

874,110

WRA Washington Restaurant Association 2/13/2010 9:23 AM Federal Statements 91-0586362 FYE: 9/30/2009 Taxable Interest on Investments Postal Unrelated Exclusion Description Amount **Business Code** Code Code Interest Income 7,960 14 \$ 7,960 Total **Taxable Dividends from Securities** Unrelated Exclusion Postal Description Amount **Business Code** Code Code Dividends 14 350,000 Royalty Payments 99 350,099 Total

# WRA Washington Restaurant Association

FYE: 9/30/2009

91-0586362

## Federal Statements

Raising Fund Ś Management & General S Form 990, Part IX, Line 24f - All Other Expenses 9,886 7,936 4,688 4,549 2,304 2,137 1,839 1,650 1,136 1,069 1,050 1,036 1,011 6,185 6,156 2,000 4,911 4,550 4,310 3,478 3,341 13,473 12,376 10,000 5,932 4,701 1,287 846 6,647 Program Service Ś 1,069 1,050 1,036 4,549 1,650 1,136 15,162 13,473 12,376 10,000 988'6 6,647 5,932 5,000 4,911 4,688 4,550 3,478 2,304 2,137 1,287 1,192 846 3,341 6,185 6,156 701 4,310 Expenses Total Ś Hill Climb/Legislative Re Chapter Funding-Multicare Telephone - Government Af Subscriptions & License F Dept of Ecology Grant Exp Training - Government Aff Internet Hosting-Reach On Database-Development/Main Coalitions/Dues/Sponsorsh Meals - Government Affair Chapter Community Enhance Training-Membership AC's Meetings/Teleconferences Chapter Newsletter – All Survey-Membership Annual Chapter Gifts/Memorials Industry Communications Training-Communications Industry Communications Description Training - Leadership Chapter Scholarships Software Maintenance Bank Charges & Fees Lists-Restaurants - Image Meals-Leadership Public Relations Meals-AC Manager Website Expense Chapter Storage Donation - EF Subscriptions Labor - Temp Advertising Campaign Training Awards Dues

## WRA Washington Restaurant Association 91-0586362 FYE: 9/30/2009

## Federal Statements

•	Management & Fund General Raising	-39 -515 -3,183 -3,737 5	
(pan	Manage Ger	w w	
Form 990, Part IX, Line 24f - All Other Expenses (continued)	Program Service	526 453 432 242 239 184 78 26 896	2
Other Ex		у. С	<b> </b>
Line 24f - Al	Total Expenses	526 453 432 239 239 184 -39 -3183	1001
990, Part IX,	Ш	w. w	  -
Form			
	Description	Chapter Ed/Networking Eve Meals-Administration Training-Information Serv Meals-Communictions Taxes-Business Bank Finance Charges-Spok Chapter A/Staff Expense-S Meals-Business Developmen Depreciation adjustment Gain on Sale of Asset Prior Period Adjustment	

Form 990 (2008) Washington Restaurant Association 91-0586362

EXEC. DIRECTOR - PRESIDENT

Anthony Anton

- Fye 9.30.2009

Sacray-Benefit

	Oct	Nov 44 669 68	Dec	Jan 11 ses se	Feb	March 44 666 66	April	May	June	July	Aug	Sept	Total
Salary Payroll Taxes:	11,000.00	1,000.00	00.000	00.000	00.000.00	00.000	11,000.00	0000111	11,000.60	12,083 32	72,083 32		141,249.90
Social Security	176 05		1	712.88	712.88	712.88	712.87	712.88	712 88	738 71	738 71	738 72	6,689 46
Medicare	169.17	169.17	169.17	169 17	169.17	169.17	169 17	169 17	169 17	175 21	175 21	175.21	2,048.12
FUTA Annualized	28 00												26.00
State Unemployment				295.17	295.17	295 17	17 71	•					903 21
State L&I Annualized	185.74												185.74
Co. match - 401k	583.33	583 33	583.33	583 33	583.33	583.33	583 33	583 33	583.33	604.17	604 17	604 17	7,062.50
Dental - Guardian	174.95	174.95	174 95	174.95	174 95	174 95	174.95	188 95	188 95	188.95	188 96	188.96	2,169 42
Life Insurance/LTD - Principal	35.87	35 87	35.87	35 87	35.87	35.87	36 36	19.42	36 39	36 39	36.39	36 39	416 59
Medical - HIHIT	1529 60	1529 60	1529 60	1566 77	1566.77	1566 77	1566 77	1566.77	1566.77	1566.77	1566.77	1586 77	18,689 73
Monthly Total	14,577.37	14,577.37 14,159.58	14,159 58	15,204.80	15,204 80	15,204.80	14,927 85	14,907.18	14,924 15	15,393 51	15,393 52	15,393.53	179,450 67

## **WRA BOARD OF DIRECTORS:**

## Exec Committee

Vice-Chair and Chair of Government Affairs Secretary/Treasurer & Chair of Finance

Immediate Past Chair

One President WRA Education Foundation:

Chairman of the Board

Bret Stewart Cente
Jim Rowe Conso

Michael Carr

Naja Hogander Steve Simmons CenterTwist

Consolidated Restaurants

Schwartz Brothers

Revolution Bar and Grill Country Gentleman

## Board of Directors (non-EC)

Full Service Operators Position 3
One Spokane Chapter President

One Tavern Licensee Allied Member Position 3 One Gambling Licensee At-Large (HIHIT Chair) At-Large (Retro Chair)

Quick Service Operators Position 2
One Hospitality (Hotel/Resort) Operator

At-Large Members Position 1

Quick Service Operators Position 1
Full Service Operators Position 4

One Catering Operator:

One Seattle Chapter President

Allied Member Position 1

Full Service Operators Position 4
Full Service Operators Position 1
Quick Service Operators Position 3

One SW Chapter President

One Spokane Chapter President

One Gambling Licensee

Full Service Operators Position 2
At-Large Members Position 2
One Seattle Chapter President
Quick Service Operators Position 4

One NRA Representative Allied Member Position 2

Adrian Ibarra El Gitano Andrew Swanson Metro Café

Betty Berge Roadhouse Bar & Grill

Bob Decker Sysco

Bob Materne Swinging Doors
Chris Grady Grady's Consulting
Dave Hooke Senor Froggy's
Ernesto Simas McDonald's
Gerry Link Vancouver Hilton
Janet Lightner Boundary Bay

Jas Sangha Twinco

Jeff Iverson Ram International
Jennie Hannah Occassions Catering
Jeremy Anderson Elliott's Oyster House

Jim Anderson Budweiser

Jim Brown Evergreen Restaurant Ventures

Jim Rowe Consolidated Restaurants

Joanna Chong rice-n-roll

Julie Morley Hostess House
Lisa Hooke Senor Froggy's

Max Falkner Wild Goose - Ellensberg

Namva Chan Chan's Dragon Reggie Frederick Chalet Bowl

Robert Bonina Washington Athletic Club

Scott Dickinson KFC
Steve Stoddard RUI
Theresa Foss Ecolab



Home Member Login The Front Burner WRA Chapters

About Us Membership Education & Training Government Affairs Meetings & Events News & Information Products & Services

## **AboutUs**

- Mission & Vision
- **Board of Directors**
- Staff
- **Employment**
- Contact Us

Acrobat Reader required to view

Search WRAkche.com

## WRA 2009 Board of Directors

The Washington Restaurant Association and the WRA Education Foundation each have a volunteer Board of Directors that provide activities and direction. Each board is made up of directors representing all segments of the restaurant industry.

To view the WRA Board of Directors three-year strategic plan, meeting minutes and upcoming agendas, or the Executive Committee meeting minutes, click here (password protected).



Steve Simmons, Chair S & S Hospitality, Inc., Kennewick



Bret Stewart, Vice Chair & Co-chair of Government **Affairs Committee** CenterTwist, Inc., Woodinville



Jim Rowe, Secretary/Treasurer & Chair of Finance Committee Consolidated Restaurants, Seattle



Michael Carr, Immediate Past Chair Schwartz Brothers Restaurants, Bellevue

Christopher Grady, Chair, Hospitatlity Industry Health Insurance Trust (HIHIT) Committee Grady's Consulting, Seattle

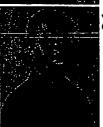
Dave Hooke, Chair, Retro Committee Señor Froggy, Spokane



Ernesto Simas McDonald's, Bellevue



Jim Anderson Anheuser Busch Companies, Kirkland



Joana Chong Concept Asia, LLC., Bellevue



Julie Morley, Southwest Chapter Chair The Hostess House, Vancouver



Janet Lightner Boundary Bay Brewery and Bistro, Bellingham



Jas Sangha Twinco, inc., dba Wendy's, Seattle

Jennie Hannah
Occasions Catering & Special Events, Olympia



Naja Hogander President of Education Foundation, Spazzo Italian Grill, Seattle



Namva Chan Chan's Dragon, Spokane



Reggle Frederick Chalet Bowl, Tacoma



Robert Bonina Washington Athletic Club, Seattle



Scott Dickinson Dickinson Northwest Inc., Vancouver



Steve Stoddard, NRA Representative

Theresa Foss Ecolab, Colbert



Jeremy Anderson, Seattle Chapter Chair Consolidated Restaurants, Seattle

Lisa Hooke Senor Froggy, Spokane

Gerry Link Hilton, Vancouver WA

Jeff Iverson RAM International, Lakewood

## WRA Education Foundation 2009 Board of Directors

- Naja Hogander, President Schwartz Brothers Restaurants, Spazzo Italian Grill, Seattle
- Paul Childers, Secretary/Treasurer
   Vesta Restaurant, Vancouver
- Shawn Garner, Immediate Past President Rosella's Fruit & Produce, Seattle
- Peter Braun, WRA Immediate Past Chair Orchard Foods, Silverdale
- Amadeus Amador Private Chef, Seattle
- Barbara Masberg
   Central Washington University, Ellensburg
- Betty Klattenhoff
   Office of the Superintendent of Public Instruction, Olympia
- Bob Mauer
   Bargreen Ellingson, Inc., Tacoma
- Dave Lumberg
   Ecolab, Colbert
- Jas Sangha Twinco: Wendy's, Lacey
- Jennie Hannah
   Considera Colorea
- Occasions Catering & Special Events, Olympia
- Mary Miller
   Department of Labor & Industries, Olympia
- Nancy Swanger
   WSU School of Hospitality Business Management, Pullman
- Louis Huang Arrow AV, Spokane
- Barbara Buttice
   Walla Walla High School, Walla Walla

## 8868 (Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Form **8868** (Rev 4-2009)

Internal F	Revenue Service	_	
● If yo	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	► X	
If you	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).		
	complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868		
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corpo	oration required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete only	▶ □	
	r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of file income tax returns		
Flectro	nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file		
	the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868		
	nically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group		
returns,	or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form		
8868. F	or more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits		
Type or	r Name of Exempt Organization Employer	identification number	
print			
File by th	Washington Restaurant Association 91-05	86362	
due date filing you	radinael, sueet, and room of suite no in a rico box, see instructions.		
return Se	se SIO FIUM SCREET SE 200		
instructio			
01	Olympia WA 98501	<del></del>	
	type of return to be filed (file a separate application for each return).	□ <b>5</b> 4700	
Form 990			
		$\boldsymbol{\exists}$	
		Form 8870	
ш .			
Tele If the	e books are in the care of  Washington Restaurant Association  ephone No.   360-956-7279  FAX No.   ne organization does not have an office or place of business in the United States, check this box has is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  whole group, check this box  If this is or part of the group, check this box  the the names and EINs of all members the extension will cover	▶ □	
<b>1</b> 1	request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time		
	until $5/15/10$ , to file the exempt organization return for the organization named above. The extension is		
fc	or the organization's return for:		
•	calendar year or tax year beginning 10/01/08, and ending 9/30/09		
2 If	2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period		
3a If	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		
<u>le</u>	ess any nonrefundable credits. See instructions. 3a	<u>\$</u>	
	f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax		
_		\$	
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	leposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	œ.	
	System) See instructions  13c   1. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO	<u>\$</u>	
	n. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO ment instructions.		

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.