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Form **990**

Department of the Treasury
Internal Revenue Service

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

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
ALLIANCE FOR EDUCATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
509 OLIVE WAY No 500

City or town, state or country, and ZIP + 4
SEATTLE, WA 981011726

D Employer identification number
91-1508191

E Telephone number
(206) 343-0449

G Gross receipts $ 9,770,777

F Name and address of principal officer
SARA MORRIS
509 OLIVE WAY No 500
SEATTLE,WA 981011726

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW ALLIANCE4ED ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1996

M State of legal domicile WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO HELP EVERY CHILD IN SEATTLE PUBLIC SCHOOLS ACHIEVE ACADEMIC SUCCESS

2 Check this box ▶☑ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	27
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	27
5	Total number of employees (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	153
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	7,574,427	8,368,910
	9	Program service revenue (Part VIII, line 2g)	102,393	105,619
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	417,769	-166,417
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-130,377	3,805
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,964,212	8,311,917
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,358,731	4,336,151
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,051,758	972,828
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	44,529	60,539
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶474,434		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	2,126,473	4,262,091
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	8,581,491	9,631,609
	19	Revenue less expenses Subtract line 18 from line 12	-617,279	-1,319,692
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	13,472,432	14,080,936
	21	Total liabilities (Part X, line 26)	3,637,558	4,063,133
	22	Net assets or fund balances Subtract line 21 from line 20	9,834,874	10,017,803

Part II Signature Block

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

Sign Here

****** | 2010-11-03
Signature of officer | Date

SARA MORRIS PRESIDENT AND CEO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Sara Elizabeth J Hyre | Date | Check if self-empolyed ▶ ☐ | Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Clark Nuber PS
10900 NE 4th Street Suite 1700
Bellevue, WA 98004

EIN ▶

Phone no ▶ (425) 454-4919

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

OUR MISSION IS TO HELP EVERY CHILD IN SEATTLE PUBLIC SCHOOLS ACHIEVE ACADEMIC SUCCESS WE PURSUE THIS MISSION BY SECURING SEED CAPITAL FOR INNOVATIONS IN LEARNING AND BY FOSTERING CITY-WIDE SUPPORT FOR EXCELLENCE IN SCHOOLS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 5,858,035 including grants of $ 2,625,566) (Revenue $)

EDUCATIONAL INVESTMENTS AND COMMUNITY ENGAGEMENT-OUR EFFORTS ARE FOCUSED ON MAKING SUSTAINABLE SYSTEMIC INVESTMENTS TO IMPROVE OUTCOMES FOR ALL SEATTLE PUBLIC SCHOOL STUDENTS WE WORK TO FOSTER BROAD COMMUNITY ENGAGEMENT AROUND PROGRAMS, ISSUES AND POLICIES THAT IMPACT ALL ASPECTS OF OUR PUBLIC SCHOOLS AND STUDENT ACHIEVEMENT PROGRAM GOALS AND ACCOMPLISHMENTS INCLUDE THE FOLLOWING 1) COMMUNITY BUILDING THE GOAL IS TO INCREASE COMMUNITY INVOLVEMENT IN THE SCHOOLS ACCOMPLISHMENTS -CONVENED THE COMMUNITY ENGAGEMENT TASK FORCE THAT ENGAGES DIVERSE GROUPS AND INDIVIDUALS IN DIALOG AND ACTION ABOUT IMPROVING SCHOOLS AND STUDENT PERFORMANCE -DEVELOPED THE SEATTLE COLLEGE ACCESS NETWORK (SCAN) TO INCREASE THE NUMBER OF LOW INCOME, STUDENTS OF COLOR AND FIRST-IN-FAMILY WHO ENROLL AND SUCCEED IN COLLEGE -CO-LED THE CONTINUING DEVELOPMENT OF A COMMUNITY SCHOOLS STRATEGY, AN INNOVATIVE MODEL OF WRAP-AROUND SERVICES AND COMMUNITY INVOLVEMENT TO SUPPORT STUDENT ACHIEVEMENT 2) DATA INFRASTRUCTURE THE GOAL IS TO PROVIDE MODERN, INTEGRATED SYSTEMS SO TEACHERS, PRINCIPALS AND ADMINISTRATORS CAN MONITOR LEARNING, TRACK PERFORMANCE AND DIRECT RESOURCES WHERE AND WHEN NEEDED ACCOMPLISHMENTS -REPLACED OUTDATED AND INCOMPATIBLE SYSTEMS WITH AN INTEGRATED ACADEMIC DATA WAREHOUSE THAT PROVIDES SECURE AND CONVENIENT ACCESS TO STUDENT ASSESSMENT INFORMATION -IMPLEMENTED MEASURES OF ACADEMIC PROGRESS (MAP) WHICH INSTANTLY MODIFIES TEST QUESTIONS TO PINPOINT STUDENTS' ACHIEVEMENT, THE RESULTS HELP TEACHERS BUILD LESSONS BASED ON WHAT'S LEARNED -DEVELOPED AND POSTED A DISTRICT SCORECARD TO SUPPORT PERFORMANCE MANAGEMENT, A DATA-DRIVEN FRAMEWORK AND ACCOUNTABILITY TOOL THAT REINFORCES EDUCATORS' FOCUS ON STUDENT ACHIEVEMENT 3) CURRICULUM DEVELOPMENT TO CREATE A COLLEGE-READY CULTURE, THE DISTRICT IS ALIGNING CURRICULA WITH STATE STANDARDS AND COLLEGE SUCCESS REQUIREMENTS ACCOMPLISHMENTS -EXPANDED ADVANCED PLACEMENT COURSES AND ENROLLMENT -MORE THAN DOUBLED THE PERCENTAGE OF HIGH SCHOOL JUNIORS TAKING THE PSAT TO OVER 90% -ALIGNED HIGH SCHOOL MATH, SCIENCE AND LANGUAGE ARTS CURRICULA WITH COLLEGE-READY STANDARDS, CONTINUING ALIGNMENT WORK IN OTHER SUBJECT AREAS AND GRADES IN 2010 4) LEADERSHIP DEVELOPMENT THE GOAL IS TO EQUIP SCHOOL BOARD MEMBERS AND SCHOOL LEADERS WITH THE SKILLS THEY NEED TO IMPROVE STUDENT ACHIEVEMENT ACROSS THE DISTRICT ACCOMPLISHMENTS -ORGANIZED QUARTERLY RETREATS FACILITATED BY LOCAL AND NATIONAL EXPERTS INCLUDING THE CENTER FOR REFORM OF SCHOOL SYSTEMS IN ORDER TO ENHANCE GOVERNANCE, PLANNING AND COMMUNICATION SKILLS -REMOVED OUTDATED AND REDUNDANT POLICIES, IDENTIFIED GAPS IN POLICY FOR FUTURE CONSIDERATION, REINFORCED THE BOARD'S ROLE IN POLICY DEVELOPMENT THROUGH RESEARCH AND REVIEW OF BEST PRACTICES -INITIATED ONGOING LEADERSHIP DEVELOPMENT PROGRAMS TO PREPARE PRINCIPALS AND OTHERS TO LEAD EFFECTIVELY IN A COLLEGE-READY, PERFORMANCE-BASED CULTURE FOCUSED ON STUDENT SUCCESS

4b (Code) (Expenses $ 2,664,121 including grants of $ 1,710,585) (Revenue $ 110,619)

AFFILIATED SCHOOL ACTIVITIES-THE ALLIANCE FOR EDUCATION PROVIDES FISCAL SERVICES FOR OVER 200 SCHOOL-BASED GROUPS, PTAS AND EDUCATIONAL ORGANIZATIONS IN OUR COMMUNITIES THESE FUNDS SUPPORT SUPPLEMENTAL PROGRAMS IN ACADEMICS, THE ARTS, LANGUAGES, PUBLIC SERVICE, TECHNOLOGY SPORTS AND OTHER ENRICHMENT AREAS DURING THE YEAR WE PROCESSED AND ACKNOWLEDGED MORE THAN 6,000 DONATIONS FROM THE COMMUNITY TOTALING OVER $1 6 MILLION DOLLARS AND DISBURSED $2 4 MILLION FOR NEIGHBORHOOD SCHOOLS AND PROGRAMS INCLUDING INSTRUCTIONAL SUPPORT, SCHOLARSHIPS, AWARDS, MATERIALS, TRAININGS AND OTHER ACTIVITIES

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)

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

4e **Total program service expenses** ▶ $ 8,522,156

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
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		
6	Did the organization maintain any donor advised funds or any similar funds or 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	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — 12A: Yes: ; No: No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		No
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 U S ? *If "Yes," complete Schedule F, Part II*	15		No
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 U S ? *If "Yes," complete Schedule F, Part III*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
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 24b–24d and complete Schedule K. If "No," go to line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**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**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
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**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
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**	Yes	
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**		No
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**		No
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**		No
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**		No
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**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable*	1a	69			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
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	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			2b		
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	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					
a	Gross income from members or shareholders	11a				
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 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body	1a 27			
b	Enter the number of voting members that are independent	1b 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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		No
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 safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

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

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 ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

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

CHUCK SCHAFER
509 OLIVE WAY No 500
SEATTLE, WA 981011726
(206) 343-0449

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 Report compensation for the calendar year ending with or within the organization's tax year 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 all of the organization's **current** key employees See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See add'l data										

1b Total . . . . ▶	356,342	0	50,501

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	**(B)** Description of services	**(C)** Compensation
BOSTON CONSULTING GROUP 355 SOUTH GRAND AVENUE SUITE 3200 LOS ANGELES, CA 90071	DISTRICT-WIDE PERF MGMT SYSTEM DVLPMT	1,150,000
BRAINBOX 3955 W BLAKELY AVE NE BAINBRIDGE ISLAND, WA 98110	DISTRICT-WIDE DATA MGMT SYSTEMS DVLPMT	788,108
GMMB 1200 WESTLAKE AVE N SUITE 1005 SEATTLE, WA 98109	COMM SUPPORT FOR DISTRICT STRATEGIC PLAN	199,130

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶3

Part VIII 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
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . .	1a 170,671				
	b	Membership dues	1b				
	c	Fundraising events	1c 307,132				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e 95,087				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 7,796,020				
	g	Noncash contributions included in lines 1a-1f $ 153,742					
	h	**Total.** Add lines 1a-1f . . . . ▶		8,368,910			
Program Service Revenue			Business Code				
	2a	ADMINISTRATIVE FEES	611,710	105,619	105,619		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		105,619			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶		216,928			216,928
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					
			(i) Real / (ii) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) 894,800				
	b	Less cost or other basis and sales expenses	(i) 1,278,145				
	c	Gain or (loss)	(i) -383,345				
	d	Net gain or (loss) . . . . ▶		-383,345			-383,345
	8a	Gross income from fundraising events (not including $ 307,132 of contributions reported on line 1c) See Part IV, line 18 . . .	a 180,795				
	b	Less direct expenses . . .	b 174,815				
	c	Net income or (loss) from fundraising events . . ▶		5,980			5,980
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a 3,625				
	b	Less direct expenses . . .	b 5,900				
	c	Net income or (loss) from gaming activities . . . ▶		-2,275			-2,275
	10a	Gross sales of inventory, less returns and allowances .	a				
	b	Less cost of goods sold . .	b				
	c	Net income or (loss) from sales of inventory . . ▶					
		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	900,099	100			100
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . . ▶		100			
	12	**Total revenue.** See Instructions . . . ▶		8,311,917	105,619	0	-162,612

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 not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	4,272,406	4,272,406		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	63,745	63,745		
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				
5	Compensation of current officers, directors, trustees, and key employees	406,843	142,955	133,619	130,269
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	422,006	149,835	139,677	132,494
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	33,795	10,984	10,513	12,298
9	Other employee benefits	42,722	13,887	13,291	15,544
10	Payroll taxes	67,462	22,854	23,308	21,300
11	Fees for services (non-employees)				
a	Management				
b	Legal	37,880	35,557	1,335	988
c	Accounting	25,227	23,680	889	658
d	Lobbying				
e	Professional fundraising *See Part IV, line 17* . .	60,539			60,539
f	Investment management fees	56,649		56,649	
g	Other	2,663,365	2,556,842	96,022	10,501
12	Advertising and promotion				
13	Office expenses	396,981	321,336	50,104	25,541
14	Information technology				
15	Royalties . .				
16	Occupancy	92,242	23,478	42,294	26,470
17	Travel	42,048	38,521	2,786	741
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	193,472	177,243	12,818	3,411
20	Interest	93	31	48	14
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,592	4,766	8,432	5,394
23	Insurance	3,561	1,195	1,844	522
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)				
a	CHANGE IN DONOR INTENT	598,319	598,319		
b	BUSINESS EXCISE TAXES	38,903	13,055	20,144	5,704
c	BAD DEBT EXPENSE	37,976	18,012		19,964
d	IN KIND GOODS EXPENSE	28,687	28,687		
e	MISCELLANEOUS	14,210	4,768	7,360	2,082
f	All other expenses	13,886		13,886	
25	**Total functional expenses.** Add lines 1 through 24f	9,631,609	8,522,156	635,019	474,434
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	548,751	1	89,794
	2	Savings and temporary cash investments	6,932,733	2	7,256,105
	3	Pledges and grants receivable, net	209,636	3	199,450
	4	Accounts receivable, net	26,091	4	28,572
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	12,331	9	9,873
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* — 10a: 113,506			
	b	Less accumulated depreciation — 10b: 88,318	43,781	10c	25,188
	11	Investments—publicly traded securities	5,604,497	11	6,367,538
	12	Investments—other securities See Part IV, line 11	76,630	12	86,434
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	17,982	15	17,982
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	13,472,432	16	14,080,936
Liabilities	17	Accounts payable and accrued expenses	473,499	17	263,747
	18	Grants payable	3,164,059	18	3,799,386
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	3,637,558	26	4,063,133
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	384,661	27	393,788
	28	Temporarily restricted net assets	8,455,606	28	9,466,688
	29	Permanently restricted net assets	994,607	29	157,327
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	9,834,874	33	10,017,803
	34	Total liabilities and net assets/fund balances	13,472,432	34	14,080,936

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . .	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
ALLIANCE FOR EDUCATION

Employer identification number
91-1508191

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col (i) of your support? Yes	No	(vi) Is the organization in col (i) organized in the U S ? Yes	No	(vii) Amount of support?
Total									

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	7,743,893	6,480,698	5,184,846	7,574,427	8,368,910	35,352,774
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	7,743,893	6,480,698	5,184,846	7,574,427	8,368,910	35,352,774
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,645,734
6 **Public Support.** Subtract line 5 from line 4						25,707,040

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	7,743,893	487,301	5,184,846	7,574,427	8,368,910	35,352,774
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	342,553	487,301	431,845	368,072	216,928	1,846,699
9 Net income from unrelated business activities, whether or not the business is regularly carried on					3,705	3,705
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	6,247	6,954	5,381	1,370	100	20,052
11 **Total support** (Add lines 7 through 10)						37,223,230

12 Gross receipts from related activities, etc (See instructions) | 12 | 663,096

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) | 14 | 69 060 %

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 | 15 | 76 300 %

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

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

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public support percentage from 2008 Schedule A, Part III, line 15	**16**	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment income percentage from **2008** Schedule A, Part III, line 17	**18**	

19a **33 1/3% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
ALLIANCE FOR EDUCATION

Employer identification number
91-1508191

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		7
2	Aggregate contributions to (during year)		600,129
3	Aggregate grants from (during year)		587,585
4	Aggregate value at end of year		494,730

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☑ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included 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, extinguished, or terminated by the organization during the taxable year ▶____________

4 Number of states where property subject to conservation easement is located ▶____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶____________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ____________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ____________

(ii) Assets included in Form 990, Part X ▶ $ ____________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		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 Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	5,889,810	8,209,064			
b Contributions	20,129	22,593			
c Investment earnings or losses	1,188,350	-2,050,873			
d Grants or scholarships	172,060	93,930			
e Other expenditures for facilities and programs	595,369	131,331			
f Administrative expenses	23,995	65,713			
g End of year balance	6,306,865	5,889,810			

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 97 510 % %

b Permanent endowment ▶ 2 490 % %

c Term endowment ▶ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		11,530	5,530	6,000
d Equipment		91,026	76,964	14,062
e Other		10,950	5,824	5,126
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				25,188

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
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	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 Footnote 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

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)	1	8,311,917
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	9,631,609
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,319,692
4	Net unrealized gains (losses) on investments	4	1,502,621
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	1,502,621
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	182,929

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	9,760,244
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	1,502,621		
b	Donated services and use of facilities	2b	2,355		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-56,649		
e	Add lines **2a** through **2d**			2e	1,448,327
3	Subtract line **2e** from line **1**			3	8,311,917
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	8,311,917

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	9,577,315
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	2,355		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	2,355
3	Subtract line **2e** from line **1**			3	9,574,960
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	56,649		
c	Add lines **4a** and **4b**			4c	56,649
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	9,631,609

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	THE ALLIANCE HAS SEVERAL ENDOWMENTS EACH WITH SPECIFIC PURPOSES THE JOHN STANFORD FUND IS INTENDED FOR GENERAL SUPPORT OF THE MISSION OF THE ALLIANCE THE REMAINING ENDOWMENT FUNDS ARE INTENDED TO SUPPORT AWARDS TO PRINCIPALS, TEACHERS OR STUDENTS OR GENERAL SUPPORT FOR SPECIFIC SCHOOLS OR SCHOOL PROGRAMS IN THE SEATTLE SCHOOL DISTRICT
Part XII, Line 2d - Other Adjustments		STOCK TRANSFER FEES RECLASS -585 INVESTMENT MANAGEMENT FEES -56064
Part XIII, Line 4b - Other Adjustments		STOCK TRANSFER FEES RECLASS 585 INVESTMENT MANAGEMENT FEES 56064

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
ALLIANCE FOR EDUCATION

Employer identification number
91-1508191

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

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

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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
MONTERO PRODUCTIONS	SPECIAL EVENT COORDINATION		No	602,607	30,000	572,607
LYNCH RESOURCES	PHONATHON SERVICES		No	79,011	30,539	48,472
Total				681,618	60,539	621,079

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

WA

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

			(a) Event #1 BREAKFAST (event type)	(b) Event #2 AUCTION/DINNER (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	217,447	381,535		598,982
	2	Less Charitable contributions	217,447	200,740		418,187
	3	Gross income (line 1 minus line 2)		180,795		180,795
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes				
	6	Rent/facility costs		1,548		1,548
	7	Food and beverages	23,609	64,816		88,425
	8	Entertainment		550		550
	9	Other direct expenses	19,702	64,590		84,292
	10	Direct expense summary Add lines 4 through 9 in column (d)				174,815
	11	Net income summary Combine lines 3, column d, and line 10				5,980

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

			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d)				
	8	Net gaming income summary Combine lines 1, column d, and line 7				

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities ____			
a	Is the organization licensed to operate gaming activities in each of these states?	9a		
b	If "No," Explain			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b	If "Yes," Explain			
11	Does the organization operate gaming activities with nonmembers?	11		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

			Yes	No
13	Indicate the percentage of gaming activity operated in			
a	The organization's facility **13a**			
b	An outside facility **13b**			
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records Name ▶ Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	**15a**		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____ and the amount of gaming revenue retained by the third party ▶ $ ____			
c	If "Yes," enter name and address Name ▶ Address ▶			
16	Gaming manager information Name ▶ Gaming manager compensation ▶ $ ____ Description of services provided ▶ ☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions			
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	**17a**		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $			

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
ALLIANCE FOR EDUCATION

Employer identification number
91-1508191

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶ 11

3 Enter total number of other organizations . . . . ▶ 2

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
MAYOR'S SCHOLARSHIPS - TUITION SCHOLARSHIPS	20		15,485	COST	SCHOLARSHIPS
SWAIN EXCELLENCE IN TEACHING AWARD	7	3,000	2,500	COST	SCHOLARSHIPS
PROFESSIONAL CERTIFICATION FELLOWSHIPS	16	39,010			
MISCELLANEOUS SCHOLARSHIPS	7	3,750			

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	**Return Reference**	**Explanation**
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 83% OF ALL GRANT FUNDS WERE AWARDED TO THE SEATTLE PUBLIC SCHOOLS (SPS), WITH 73% AWARDED AS REIMBURSABLE GRANTS AND 27% AS DIRECT GRANTS BUDGETS ARE DETERMINED FOR EACH REIMBURSABLE GRANT PROJECT AND SPS SUBMITS MONTHLY EXPENSE REIMBURSEMENT REQUESTS WHICH ARE VERIFIED AGAINST BUDGETED EXPENDITURES BEFORE FUNDS ARE DISTRIBUTED DIRECT GRANTS FUNDS ARE DEPOSITED INTO SEPARATE COST CENTER ACCOUNTS AT SPS FOR THE SPECIFIC PURPOSE OF THE PROJECT APPROXIMATELY 11% OF TOTAL GRANTS ARE MADE TO AFFILIATED SCHOOL GROUPS IN SUPPORT OF INDIVIDUAL SCHOOLS AGREEMENTS ARE MAINTAINED ON FILE FOR EACH AFFILIATED SCHOOL GROUP THE REMAINING 6% OF GRANT FUNDS ARE AWARDED TO ORGANIZATIONS AND TO INDIVIDUALS AS SCHOLARSHIPS AND SUPPORT FOR PROFESSIONAL TEACHER CERTIFICATION

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
ALLIANCE FOR EDUCATION

Employer identification number
91-1508191

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☑ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
PATRICK D'AMELIO	(i)	150,000	7,500	3,781	14,702	7,987	183,970	0
	(ii)	0	0	0	0	0	0	0
CHARLES SCHAFER	(i)	105,169	0	0	4,786	7,502	117,457	0
	(ii)	0	0	0	0	0	0	0
KAREN TOLLENAR DEMOREST	(i)	89,892	0	0	8,495	7,029	105,416	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
Supplemental Information	Part III	ALL EMPLOYEES OF ALLIANCE FOR EDUCATION ARE ACTUALLY EMPLOYEES OF THE GREATER SEATTLE CHAMBER OF COMMERCE, AN UNRELATED ORGANIZATION SINCE THE ALLIANCE REIMBURSES THE CHAMBER FOR AN EMPLOYEE'S TIME, COMPENSATION AND RELATED PAYROLL EXPENSES ARE REPORTED ON PART IX AND PART VII OF THE FORM 990

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
ALLIANCE FOR EDUCATION

Employer identification number
91-1508191

Part I Types of Property

		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded	X	7	14,038	FAIR MARKET VALUE
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (AUCTION ITEMS)	X	109	111,055	COST OR SELLING PRICE
26	Other ▶ (COMPUTERS)	X	1	4,860	COST OR SELLING PRICE
27	Other ▶ (SUPPLIES)	X	36	23,789	COST OR SELLING PRICE
28	Other ▶ ( )				

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

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

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Third Party Use	Part I, Line 32b	DONATED STOCK IS RECEIVED AND SOLD BY WELLS FARGO ADVISORS (FORMERLY WACHOVIA)

SCHEDULE N (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Liquidation, Termination, Dissolution or Significant Disposition of Assets

▶ Complete if the organization answered "Yes" to Form 990, Part IV, lines 31 or 32 or Form 990-EZ, line 36.
▶ Attach certified copies of any articles of dissolution, resolutions or plans.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
ALLIANCE FOR EDUCATION

Employer identification number
91-1508191

Part I Liquidation, Termination or Dissolution. Complete if the organization answered "Yes" to Form 990, Part IV, line 31, or Form 990-EZ, line 36. Use Schedule N-1 if additional space is needed.

1 (a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity

			Yes	No
2	Did or will any officer, director, trustee, or key employee of the organization			
a	Become a director or trustee of a successor or transferee organization?	2a		
b	Become an employee of, or independent contractor for, a successor or transferee organization?	2b		
c	Become a direct or indirect owner of a successor or transferee organization?	2c		
d	Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?	2d		
e	If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III ▶			

Part I Liquidation, Termination or Dissolution *(continued)*

Note. If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B) should equal -0-

		Line	Yes	No
3	Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III	3		
4a	Did the organization request or receive a determination letter from EO Determinations that the organization's exempt status was terminated?	4a		
b	(If "Yes," provide the date of the letter ▶)			
5a	Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?	5a		
b	If "Yes," did the organization provide such notice?	5b		
6	Did the organization discharge or pay all liabilities in accordance with state laws?	6		
7a	Did the organization have any tax-exempt bonds outstanding during the year?	7a		
b	Did the organization discharge or defease tax-exempt bond liabilities in accordance with the Internal Revenue Code and state laws?	7b		
c	If "Yes," describe in Part III how the organization defeased or otherwise settled these liabilities If "No," explain in Part III			

Part II Sale, Exchange, Disposition or Other Transfer of More Than 25% of the Organization's Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 32, or Form 990-EZ, line 36. Use Schedule N-1 if additional space is needed.

1 (a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity
CASH FOR GRANTMAKING	12-31-2009	4,336,151	ACTUAL COST			

		Line	Yes	No
2	Did or will any officer, director, trustee, or key employee of the organization			
a	Become a director or trustee of a successor or transferee organization?	2a		
b	Become an employee of, or independent contractor for, a successor or transferee organization?	2b		
c	Become a direct or indirect owner of a successor or transferee organization?	2c		
d	Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?	2d		
e	If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III			

Part III **Supplemental Information.** Complete to provide the information required by Part I, lines 2e, 7c; Part II, line 2e; and any additional information.

Identifier	Return Reference	Explanation
		DURING THE TAXABLE YEAR ENDING DECEMBER 31, 2009, ALLIANCE FOR EDUCATION HAD GRANT EXPENSES OF $4,336,151 THIS AMOUNT WAS EXPENDED IN THE ORDINARY COURSE OF THE OPERATION OF ITS EXEMPT FUNCTION ACTIVITIES BUT REPRESENTS OVER 25% OF ALLIANCE FOR EDUCATION'S NET ASSETS OF $9,834,874 AT THE BEGINNING OF THE TAXABLE YEAR ENDED DECEMBER 31, 2009 ALLIANCE FOR EDUCATION'S EXPENDITURE DOES NOT CONSTITUTE A "SUBSTANTIAL CONTRACTION" UNDER THE DEFINITION IN REG SEC 1 6043-3 AS THE DISTRIBUTION WAS SUBSTANTIALLY OUT OF CURRENT INCOME THERE IS NO PLAN TO LIQUIDATE OR CONTRACT THE ORGANIZATION

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
ALLIANCE FOR EDUCATION

Employer identification number
91-1508191

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE FORM 990 IS FIRST REVIEWED BY THE CHIEF FINANCIAL OFFICER AND CEO/PRESIDENT THEN IT IS PRESENTED FOR REVIEW BY THE FINANCE AND AUDIT COMMITTEE OF THE BOARD UPON APPROVAL BY THE COMMITTEE, THE FORM IS FINALIZED, A COPY IS PROVIDED TO EACH MEMBER OF THE BOARD AND THEN FILED WITH THE IRS
Form 990, Part VI, Section B, line 12c		BOARD MEMBERS REVIEW AND AFFIRM THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS EACH MEMBER IS REQUIRED TO DISCLOSE ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST AND TO PRESENT ALL MATERIAL FACTS TO THE BOARD OR EXECUTIVE COMMITTEE AFTER SUCH A DISCLOSURE, THE INTERESTED PERSON SHALL LEAVE THE BOARD OR EXECUTIVE COMMITTEE MEETING THE REMAINING MEMBERS SHALL DISCUSS AND VOTE WHETHER A CONFLICT OF INTEREST EXISTS IF A CONFLICT IS DETERMINED TO EXIST, THE INTERESTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR EXECUTIVE COMMITTEE MEETING, BUT SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE CONFLICT OF INTEREST THE CHAIRPERSON OF THE BOARD OR EXECUTIVE COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT AND AFTER EXERCISING DUE DILIGENCE, A DETERMINATION SHALL BE MADE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS ON WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE BEST INTERESTS OF THE ALLIANCE MEETING MINUTES WILL RECORD THE NAMES OF PERSONS WHO MADE DISCLOSURES OR WHO WERE FOUND TO HAVE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO DETERMINE THE PRESENCE OF A CONFLICT OF INTEREST AND THE BOARD OR EXECUTIVE COMMITTEE'S DECISIONS
Form 990, Part VI, Section B, line 15		CEO & PRESIDENT THE GOVERNANCE COMMITTEE OF THE BOARD OF DIRECTORS IS RESPONSIBLE FOR ESTABLISHING GOALS AND OBJECTIVES RELEVANT TO THE PRESIDENT'S COMPENSATION AND PERFORMANCE EACH YEAR AND FOR EVALUATING THE PRESIDENT'S PERFORMANCE ANNUALLY IN LIGHT OF THESE GOALS AND OBJECTIVES THE GOVERNANCE COMMITTEE UTILIZES THE EXPERTISE OF THE DIRECTOR OF PEOPLE PROGRAMS AT THE GREATER SEATTLE CHAMBER OF COMMERCE AS WELL AS THE UNITED WAY SURVEY OF LOCAL NON-PROFIT SALARIES WHEN DETERMINING COMPENSATION CFO & VP-OPERATIONS THE CEO IS RESPONSIBLE FOR ESTABLISHING GOALS AND OBJECTIVES RELEVANT TO COMPENSATION AND PERFORMANCE FOR THESE POSITIONS PERFORMANCE AND COMPENSATION ARE REVIEWED ANNUALLY THE CEO UTILIZES THE EXPERTISE OF DIRECTOR OF PEOPLE PROGRAMS AT THE GREATER SEATTLE CHAMBER OF COMMERCE AS WELL AS THE UNITED WAY SURVEY OF LOCAL NON-PROFIT SALARIES WHEN DETERMINING COMPENSATION FOR THESE POSITIONS COMPENSATION REVIEWS ARE DONE ON AN ANNUAL BASIS WITH THE LAST REVIEW IN 2009
Form 990, Part VI, Section C, line 19		AUDITED FINANCIAL STATEMENTS, ANNUAL REPORTS AND FORM 990S FOR THE PAST THREE YEARS ARE MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE THEY ARE ALSO AVAILABLE IN HARDCOPY FORM BY REQUEST GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICIES ARE AVAILABLE UPON REQUEST TO THE EXECUTIVE ASSISTANT
PART I, LINE 6		46 OF THE VOLUNTEERS SERVE ON COMMUNITY ENGAGEMENTS & EDUCATIONAL TASK FORCES, 27 SERVE ON THE BOARD OF DIRECTORS, 75 ASSIST WITH SPECIAL EVENTS AND 5 PROVIDE COMMUNICATIONS SERVICES
FORM 990, PART V, LINE 2A		ALL EMPLOYEES OF ALLIANCE FOR EDUCATION ARE ACTUALLY EMPLOYEES OF THE GREATER SEATTLE CHAMBER OF COMMERCE SINCE THE ALLIANCE REIMBURSES THE CHAMBER FOR AN EMPLOYEE'S TIME, COMPENSATION AND RELATED PAYROLL EXPENSES ARE REPORTED ON PART IX

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 91-1508191
Name: ALLIANCE FOR EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEATTLE PUBLIC SCHOOLS2445 3RD AVENUE SOUTH SEATTLE, WA 98134	91-6001541	GOVERNMENT	3,581,740				THESE FUNDS SUPPORTED DISTRICT-WIDE INITIATIVES AND INDIVIDUAL SCHOOL PROGRAMS
MCGILVRA ELEMENTARY SCHOOL PTA2003 65TH AVE W TACOMA, WA 984666215	94-3083680	501(c)(3)	287,340				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR MCGILVRA ELEMENTARY SCHOOL PTA
BRYANT ELEMENTARY SCHOOL PTA3311 NE 60TH SEATTLE, WA 98115	91-1191751	501(c)(3)	100,000				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR BRYANT ELEMENTARY SCHOOL PTA
BALLARD HIGH SCHOOL FOUNDATIONPO BOX 17626 SEATTLE, WA 98127	91-1811275	501(c)(3)	83,000				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR BALLARD HIGH SCHOOL
GARFIELD JAZZ FOUNDATION3533 NE 96TH STREET SEATTLE, WA 98115	43-1978389	501(c)(3)	52,714				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR GARFIELD HIGH SCHOOL JAZZ
ASSOCIATED FRIENDS OF ROOSEVELT DRAMAPO BOX 15886 SEATTLE, WA 98115	27-0674574	501(c)(3)	51,600				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR ROOSEVELT HIGH SCHOOL DRAMA
ROOSEVELT HIGH SCHOOL DRAMA2202 NE 115TH SEATTLE, WA 98125	27-0674574	OTHER	25,000				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR ROOSEVELT HIGH SCHOOL DRAMA
MUSIC4LIFEC/O SEATTLE PUBLIC SCHOOLS 2445 3RD AVE SOUTH SEATTLE, WA 98134	26-4733898	501(c)(3)	12,865				MUSICAL INSTRUMENTS FOR SPS STUDENTS
NATHAN HALE SPORTS BOOSTERS3810 NE 113TH SEATTLE, WA 98125	30-0344799	501(c)(3)	12,611				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR NATHAN HALE HIGH SCHOOL SPORTS PROGRAMS
DANIEL BAGLEY ELEMENTARY PTA7821 STONE AVE N SEATTLE, WA 98103	91-1283709	501(c)(3)	11,025				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR DANIEL BAGLEY ELEMENTARY PTA

Additional Data

Software ID:
Software Version:
EIN: 91-1508191
Name: ALLIANCE FOR EDUCATION

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JANE BLODGETT BOARD MEMBER	1 00	X						0	0	0
CHARLES BLUMENFELD BOARD MEMBER	1 00	X						0	0	0
JONATHAN BRIDGE IMMEDIATE PAST-CHAIR	5 00	X		X				0	0	0
KEN BUNTING BOARD MEMBER	1 00	X						0	0	0
PHIL BUSSEY BOARD MEMBER	2 00	X						0	0	0
FAY CHAPMAN BOARD MEMBER	1 50	X						0	0	0
ERLE COHEN BOARD MEMBER	1 00	X						0	0	0
MATTHEW DAILEY BOARD MEMBER	50	X						0	0	0
MICHAEL DEBELL BOARD MEMBER	3 00	X						0	0	0
PAM ESHELMAN BOARD MEMBER	2 00	X						0	0	0
LYNNETTE FRANK BOARD MEMBER	2 00	X						0	0	0
VICTOR FUNG BOARD MEMBER	1 00	X						0	0	0
ROBERT GERTH TREASURER	2 00	X		X				0	0	0
PETER GLIDDEN BOARD MEMBER	1 00	X						0	0	0
MARIA GOODLOWE-JOHNSON BOARD MEMBER	1 00	X						0	0	0
GEORGE GRIFFIN III CHAIR	5 00	X		X				0	0	0
KEN HAMM BOARD MEMBER	1 00	X						0	0	0
BRADLEY HOFF BOARD MEMBER	1 00	X						0	0	0
BRUCE LEADER BOARD MEMBER	50	X						0	0	0
BRENT LOWER BOARD MEMBER	50	X						0	0	0
PAM MACEWAN VICE-CHAIR, CHAIR-ELECT	2 00	X		X				0	0	0
CHASE MORGAN BOARD MEMBER	2 00	X						0	0	0
MATTHEW PADDOCK VICE-CHAIR, DEVELOPMENT	1 00	X		X				0	0	0
SHANE PHILPOT BOARD MEMBER	1 00	X						0	0	0
JENA THORNTON BOARD MEMBER	1 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
LIZ VIVIAN VICE-CHAIR, SECRETARY	1 00	X						0	0	0
BRUCE WILLIAMS BOARD MEMBER	1 00	X						0	0	0
PATRICK D'AMELIO PRESIDENT & CEO	40 00			X				161,281	0	22,689
CHARLES SCHAFER CFO	40 00			X				105,169	0	12,288
KAREN TOLLENAR DEMOREST VP OPS/INTERIM CEO	40 00			X				89,892	0	15,524

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	**(A) Total expenses**	**(B) Program service expenses**	**(C) Management and general expenses**	**(D) Fundraising expenses**
CHANGE IN DONOR INTENT	598,319	598,319		
BUSINESS EXCISE TAXES	38,903	13,055	20,144	5,704
BAD DEBT EXPENSE	37,976	18,012		19,964
IN KIND GOODS EXPENSE	28,687	28,687		
MISCELLANEOUS	14,210	4,768	7,360	2,082

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOOL KIDS COME FIRST C/O OFFICE OF SCHOOL PARTNERSHIPS MS 33-300 PO BOX 34165 SEATTLE, WA 98124	99-9999999	PENDING	7,773				SUPPORT FOR TEACHER PROPOSED PROJECTS WITHIN SEATTLE PUBLIC SCHOOLS
COMMUNITIES IN SCHOOLS OF SEATTLE 6201 15TH AVE NW 522 SEATTLE, WA 98107	91-1910330	501(c)(3)	7,000				SUPPORT FOR GENERAL OPERATIONS IN SUPPORT OF STUDENT ACHIEVEMENT AT SEATTLE PUBLIC SCHOOLS
INGRAHAM HIGH SCHOOL 1819 NE 135TH STREET SEATTLE, WA 98133	91-6001541	GOVERNMENT	6,935				AFFILIATED SCHOOL ACTIVITY - SUPPORT FOR INGRAHAM HIGH SCHOOL CLASS OF 2010