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Form **990-EZ** 

Department of the Treasury

## **Short Form 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)

► Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150

2009

Open to Public Inspection

| Interna    | al Revenu                | e Service   | L                   | - 1116             | - Organiza      | uon may n   | _           |               |            |                | siaio repu   | aung require    |             |           |             |              |                  |
|------------|--------------------------|---|---------------------|--------------------|-----------------|-------------|-------------|---------------|------------|----------------|--|-----------------|-------------|-----------|-------------|--------------|------------------|
| AF         | or the                   | 2009 calend   | ar year,            |                    |                 | <u></u>     | 7           | Juli          |            | 01             | , <b>2009</b> , aı                                 | nd ending       | Jun         | ٠,        | <u> 30</u>  | , 2          | 20 10            |
| Вс         | heck if ap               | oplicable   | Please              |                    | ne of orga      | anization   |             | -             |            |                |  |                 | D Emp       | loyer id: |             | ation num    |                  |
|            | ddress c                 | hange   | use IRS<br>tabel or |                    | uan             | itas        | ch          | ouls +        | oun        | datio          | $\sim$   |                 | 91          | -10       | 571         | 1023         | ス しゅんしゅん         |
| =          | ame cha                  | -   | print or            | Numbe              | er and str      | eet (or P C | box, i      | f mail is not | delivered  | to street ac   | ddress) F  | Room/suite      |             | ohone n   |             |              |                  |
| ==         | nitial retu<br>Terminate |   | type.<br>See        | 196                | 351             | U٤          | 132         | 2,~1 3        | <b>S</b> + |                |  |                 | 142         | 5-4       | 36          | -25          | 70               |
| =          |                          |   | Specific            | City or            |                 | ate or cour |             |               |            | ·· ·· ·· ·· ·· |  |                 | <del></del> | up Exe    |             |              |                  |
| =          | vmended<br>voolicatio    | n pending   | Instruc-<br>tions.  | ٦Ŕ٠                | RILL            | CWA         | 1           | JA            | 980        | 034 -          | 591 C  | 2               |             | nber ▶    | •           | •            |                  |
| =          |                          |   |                     |                    |                 |             |             |               |            |                |  |                 |             |           |             | `b []        | Accrual          |
|            | • Seci                   | tion 501(c)(3)  |                     |                    |                 |             |             | or 990-       |            | usts must      | attach   | Othe            | r (specify  | )_►       |             |              |                  |
|            |                          |   |                     |                    |                 |             |             |               |            |                |  | H Chec          | * ► ⊠       | if the o  | rgani       | zation ıs    | not              |
| 1 W        | <b>/ebsit</b>            | e: ►  |                     |                    |                 |             |             |               |            |                |  | requ            | ired to at  | tach So   | chedu       | le B (For    | m 990,           |
| JT         | ax-exe                   | mpt status (  | check o             | only one)          | <u>) – [4 5</u> | 501(c) ( 🤮  | <u>3) ∢</u> | (insert no    | .) 🗌 49    | 347(a)(1) or   | <b>527</b>   | 990-            | EZ, or 99   | 0-PF).    |             |              |                  |
| KC         | heck >                   | ▶ ☐ if the  | e organi            | nization is        | s not a s       | ection 50   | 9(a)(3)     | supportin     | g organiz  | zation and     | ıts gross ı  | receipts are    | normally    | not mo    | ore tha     | an \$25,0    | 00. A            |
| F          | orm 99                   | 90-EZ or Form   | n 990 re            | etum is r          | not requi       | ired, but   | ıf the      | organizatı    | on choos   | ses to file a  | return, b  | e sure to file  | e a comp    | lete ret  | tum.        |              |                  |
| LA         | dd lines                 | 5b, 6b, and 7   | b, to line          | ne 9 to de         | etermine        | gross rec   | eipts; i    | f \$500,000   | or more,   | file Form 9    | 90 instead   | of Form 99      | 0-EZ        | \$        |             |              |                  |
|            | art l                    |   |                     |                    |                 |             |             |               |            |                |  | s (See th       |             | ctions    | s for       | Part I.)     |                  |
|            | 1                        | Contributio   |                     |                    |                 |             |             |               |            |                |  |                 |             | 1         | 2           | ·            | 14.00            |
|            | 2                        | Program s   | _                   |                    |                 |             |             |               |            | tracts         |  |                 |             | 2         | 5           | 269          |                  |
|            | 3                        | Membersh  |                     |                    |                 |             |             |               |            |                |  |                 |             | 3         |             |              | <del>-</del>     |
|            | 4                        | Investment  | •                   |                    |                 |             | • •         |               | • •        |                |  |                 | • •         | 4         |             |              | 5.89             |
|            | 5a                       | Gross amo   |                     |                    | of acc          | · · ·       | · · ·       |               |            |                | 5a   |                 | • •         |           |             |              | 3.0.             |
|            |                          |   |                     |                    |                 |             |             |               | •          |                |  |                 |             | 1 1       |             |              |                  |
|            | i                        | b Less: cost or other basis and sales expenses  |                     |                    |                 |             |             |               | ┨╻         |                | _  |                 |             |           |             |              |                  |
| θ          | C                        |   |                     |                    |                 |             |             |               |            |                |  |                 |             | 5c        |             |              |                  |
| 5          | 6                        | Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ |                     |                    |                 |             |             |               |            |                |  |                 |             |           |             |              |                  |
| Revenue    | а                        | Gross reve  | •                   |                    | Jding \$        |             |             |               | of cont    | nbutions       |  |                 |             | ĺ         |             |              |                  |
| æ          |                          | reported o  | n line 1            | 1)                 |                 |             |             |               |            |                | 6a   | 10151           |             | 1 1       |             |              |                  |
|            | b                        | Less: direc   | t expe              | enses o            | ther tha        | ın fundra   | aising      | expense       | s.         |                | 6b   | <u> 5493</u>    | . 20        |           |             | 11.          | 58.20            |
|            | С                        | Net income  | e or (lo            | oss) fror          | n speci         | al event    | s and       | activities    | s (Subtra  | act line 6l    | b from lir   | ne 6a) .    .   |             | 6c        |             | 463          | <u> </u>         |
|            | 7a                       | Gross sale  | s of inv            | nventory           | , less ro       | eturns a    | nd all      | owances       |            |                | 7a   |                 |             |           |             |              |                  |
|            | b                        | Less: cost  | of goo              | ods solo           | d .             |             |             |               |            |                | 7b   |                 |             | ] [       |             |              |                  |
|            | c                        | Gross prof  | it or (lo           | oss) froi          | m sales         | of inve     | ntory       | (Subtract     | line 7b    | from line      | 7a) .  |                 |             | 7c        |             |              |                  |
|            | 8                        | Other reve  |                     |                    |                 |             | •           | •             |            |                |  |                 | ,           | 8         |             |              |                  |
|            | 9                        | Total reve  | •                   |                    | _               | 3. 4. 5c.   | 6c. 7       | c. and 8      |            | RET            | FIV  | ΕD              |             | 9         |             | 18 97        | 6.09             |
|            | 10                       | Grants and  |                     |                    |                 |             | _           |               |            |                | <del>/                                      </del> |                 |             | 10        | 3           |              | 9.32             |
|            | 11                       | Benefits pa   |                     |                    |                 | •           |             | •             | 8          |                |  | ့္ကုိ           | 1           | 11        |             | <u>ء ر س</u> | <u>- 77 5 4 </u> |
| ဟ          | 12                       | Salaries, o   |                     |                    |                 |             | - •         |               | E2705      | NOA            | 012  | )10   Ö         | 1           | 12        | 2           | 191          | 9.38             |
| 86         | 13                       | Profession  |                     |                    |                 |             |             |               |            |                |  | (Q)             | 1           | 13        |             |              | 1.43             |
| xbeuses    | 14                       |   |                     |                    |                 |             |             | eperiuerii    | . Contra   |                | FAI  | <del>``</del> ₽ |             | 14        |             | 9 6 7        | <u> </u>         |
| 찣          | 15                       | Occupancy, rent, utilities, and maintenance   |                     |                    |                 |             |             |               | 15         |                | 2 -  | 7.19            |             |           |             |              |                  |
| _          | 16                       | Other expe  |                     |                    | _               | anu Sili    | hhuig       |               |            |                |  |                 |             | 16        |             |              | 3.00             |
|            | 17                       | •   |                     | •                  | _               | brough      | 16          |               |            |                |  | <del>_</del>    |             |           | q           |              |                  |
| _          | 18                       | Total expe<br>Excess or   |                     |                    |                 |             |             |               |            |                |  |                 |             | 17        | <u>ð</u>    |              | 4.32             |
| Net Assets | 19                       | Net assets  |                     |                    |                 |             |             |               |            |                |  |                 |             | 18        | <del></del> | <b>L</b> 113 | <u> 8.23</u> )   |
| 386        | פו                       | end-of-yea  |                     |                    |                 |             |             |               |            |                |  |                 |             |           |             | · -          |                  |
| ₹.         |                          | -   | -                   | •                  |                 |             |             | -             |            |                |  |                 |             | 19        |             | <u> </u>     | <u>09.45</u>     |
| 9          | 20                       | Other char  |                     |                    |                 |             |             |               |            |                |  |                 |             | 20        |             |              |                  |
|            | 21                       | Net assets  |                     |                    |                 |             |             |               |            |                |  | <del></del>     |             | 21        |             |              | 11.22            |
| P          | art II                   | Balance   | e Shee              |                    |                 |             |             |               | n (B) ar   | e \$1,250,     | 000 or m   | nore, file Fo   |             |           |             |              |                  |
|            |                          |   |                     | •                  |                 |             |             | Part II.)     |            |                |  |                 | eginning o  |           |             | (B) End o    |                  |
| 22         |                          | ash, savings  | , and ir            |                    |                 |             |             |               |            |                |  |                 | 2 309.      |           | 22          | 251          | 71.22            |
| 23         | La                       | nd and build  | dings .             |                    |                 |             |             |               |            |                |  |                 |             |           | 23          |              |                  |
| 24         | Ot                       | her assets (  | describ             | ibe ▶ _            |                 |             |             |               |            |                |  | .) [            |             |           | 24          |              |                  |
| 25         | To                       | tal assets .  |                     |                    |                 |             |             |               |            |                |  | . 32            | 2309.       | 45        | 25          | 251          | 71. 22           |
| 26         | To                       | otal liabilitie   | s (desc             | scribe <b>&gt;</b> |                 |             |             |               |            |                |  | _) [            |             |           | 26          |              |                  |
|            | . NI                     | * accets ar   | fund l              | halana             | oo (lino        | 27 of a     | مصم         | (D)           | + 0000     | vedth line     | 211  | 7-              | 2 2 4 6     |           | <b>⊸</b> T  | 7            |                  |

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

Cat. No. 10642I

Form **990-EZ** (2009)



| Part                    | Statement of Program Service Accomp               | <b>lishments</b> (See the instru              | ctions for Part III                               | .)   |             | Expenses   |  |  |
|-------------------------|---|---|---|--|-------------|--|--|--|
| What i                  | s the organization's primary exempt purpose? 45   | SIST STUDENTS & PROVI                         | OF EDUCATIONA                                     | IL PROBBAL                                       | Requ        | red for section                                  |  |  |
| Descn                   | be what was achieved in carrying out the orga     | anization's exempt purpos                     | es. In a clear an                                 | d concise  | 301(0)      | (S) and SUI(C)(4)                                |  |  |
| manne                   | er, describe the services provided, the number of | persons benefited, and o                      | ther relevant infor                               | mation for                                       |             | zations and section<br>a)(1) trusts, optional    |  |  |
|                         | program title.                                    | <b>, , , , , , , , , , , , , , , , , , , </b> |   |  | for oth     |  |  |  |
|                         |   |   |   |  |             |  |  |  |
| <b>28</b> _             | Provide extended day progr                        | ans L betore E ad                             | THE SCHOOL )                                      | 1-0  |             |  |  |  |
|                         | Community students                                |   |   |  |             |  |  |  |
| _                       | ·   |   |   |  |             | 51,793   |  |  |
| (                       |   | ncludes foreign grants, che                   |   |  | 28a         |  |  |  |
| 29                      | Provide Outdoor Educat                            |   |   |  |             |  |  |  |
| -                       | at Juan to Elementa                               |   |   |  |             |  |  |  |
| -                       |   | · <del>···</del>                              |   |  |             | 16,037.  |  |  |
| 7                       | Ot- C   | ncludes foreign grants, che                   | vek horo  | N [7]  | 29a         | 16,037.  |  |  |
|                         |   |   |   | <u>. ت ح .</u>                                   |             | <del></del>                                      |  |  |
| 30 _                    | Donate funds to Lake Washing                      |   |   |  |             |  |  |  |
| =                       | to support & provide program                      | ns , enrichment                               | g menteri'n                                       | ot v   |             |  |  |  |
| _                       | benefit students.                                 |   |   |  |             | 23 253.  |  |  |
| (                       | Grants \$ ) If this amount i                      | ncludes foreign grants, che                   | eck here  | . ▶ 🗆  | 30a         |  |  |  |
| _                       | Other program services (attach schedule)          |   |   |  |             |  |  |  |
|                         |   | includes foreign grants, che                  | eck here  | . ▶ 🗆  | 31a         | _  |  |  |
|                         | Total program service expenses (add lines 28a ti  |   |   | <b>&gt;</b>                                      | 32          | 91083.   |  |  |
| Part                    |   |   |   | ted. (See the                                    |             |  |  |  |
| - 411                   | Lot of Officero, Directors, Tractices, and Itey   | (b) Title and average                         | (c) Compensation                                  | (d) Contributio                                  |             | (e) Expense                                      |  |  |
|                         | (a) Name and address                              | hours per week                                | (If not paid,                                     | employee benefit                                 | plans &     | account and                                      |  |  |
|                         |   | devoted to position                           | enter -0)   | deferred compe                                   | rsation     | other allowances                                 |  |  |
| \L                      | aul Luczak  | PRES 1-2                                      |   | 12   |             | 2  |  |  |
|                         | 3136- MUHan NE Bellvucht                          | 1 - 2 3 1 2                                   | - 90  |  |             |  |  |  |
| Lu                      | nae Leptich                                       |   |   | 1  |             | $\sim$   |  |  |
|                         | 12610 - 89th Ave NE KIEKLANDW                     | VP ZI   |   |  |             | $\mathcal{L}$                                    |  |  |
| $\overline{\mathbf{k}}$ | athy Marshall                                     | _   |   |  |             | 7,   |  |  |
| 1                       | 4739 Eagle Harbor DR NE Beinbridgels              | TKEAS 1-2                                     | $\omega$  | $\mathscr{D}$                                    |             | <i>Ø</i>   |  |  |
|                         |   |   |   |  |             | <u> </u>   |  |  |
| I'                      | largaret Beneeke                                  | 12SEC 2                                       | N   | Ø  |             |  |  |  |
| <del></del>             | 13806 W LK Kathleen Dr. NE Reno                   | NUMUCC &                                      |   | <del></del>                                      | <del></del> | /  |  |  |
| $\underline{w}$         | Craly GILDERSLEEVE                                |   | a   | <i>f)</i>  |             | P  |  |  |
|                         | 9792 NEIZYHST KICKLAND WA                         | VIRECTOR <1                                   |   |  |             | ļ <i>.</i>                                       |  |  |
| Jo                      | clic Penderass                                    |   | d   | <b>A</b>   |             | 1  |  |  |
|                         | 13410 - 98H AUC DE KICKLAROLD                     | DIECTOR 2                                     | $\mathscr{S}$                                     | $\mathcal{L}$                                    |             | 9  |  |  |
| K.                      | RIS WOOD  |   |   |  |             |  |  |  |
|                         | 1503 NE 12PHST. KIRKLANDUM                        | DIRECTOR (1                                   | 08  |  |             |  |  |  |
|                         |   | w1 - 6C   V   - 1                             | <del>  7                                   </del> |  |             | 7  |  |  |
|                         | ma McGinnis                                       | DIRECTOR (1                                   | $\mathcal{O}$                                     | 0  |             | 9  |  |  |
|                         | 1512-76HDRNE Marysville WA                        | G/  |   | <del></del>                                      |             | <del>'</del>                                     |  |  |
| 140                     | ny Lotquist                                       |   | <i>X</i>  | ()   |             | 1 2  |  |  |
|                         | ny Lofquist 9422 10% 13012 Pl. Kiekindows         | DIRECTORCI                                    |   |  |             | <del></del>                                      |  |  |
|                         |   | ,   | 1   |  |             | }  |  |  |
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|                         |   | ·   |   |  | For         | m <b>990-EZ</b> (2009)                           |  |  |

| Part | Other Information (Note the statement requirements in the instructions for Part V.)   |                |          |          |
|------|---|----------------|----------|----------|
|      |   |                | Yes      | No       |
| 33   | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity  | 33             |          | /        |
| 34   | Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes  | 34             |          |          |
| 35   | If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T. |                |          | 1        |
| а    | Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?  | 35a            |          |          |
| b    | If "Yes," has it filed a tax return on Form 990-T for this year?  | 35b            |          | ウ        |
| 36   | Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N   | 36             |          | /        |
| 37a  | Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a   |                |          | 7        |
|      | Did the organization file Form 1120-POL for this year?  | 37b            |          |          |
| 38a  | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?                         | 38a            |          |          |
| b    | If "Yes," complete Schedule L, Part II and enter the total amount involved   38b  |                |          | 7        |
| 39   | Section 501(c)(7) organizations. Enter:   | 1              |          |          |
| а    | Initiation fees and capital contributions included on line 9  |                |          |          |
| b    | Gross receipts, included on line 9, for public use of club facilities   | ]              | 1        | ŀ        |
| 40a  | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:   | 1              |          | 1        |
|      | section 4911 ▶; section 4912 ▶; section 4955 ▶  |                |          | ĺ        |
| b    | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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  | 40b            |          |          |
| С    | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958   |                |          |          |
| d    | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization   |                |          |          |
| e    | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  | 40e            |          | /        |
| 41   | List the states with which a copy of this return is filed. ▶  |                |          | 7        |
| 42a  | The organization's books are in care of ▶ Telephone no. ▶   |                |          |          |
|      | Located at ► ZIP + 4 ►  |                |          |          |
| þ    | 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   |                | Yes      | No       |
|      | account)?   | 42b            | <u> </u> |          |
|      | 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.   |                |          | ١.       |
| С    | At any time during the calendar year, did the organization maintain an office outside of the U.S.?  | 42c            | 1        | <u> </u> |
| 43   | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here   |                |          | ▶ [      |
|      | and enter the amount of tax-exempt interest received or accrued during the tax year   |                |          |          |
|      |   |                | Yes      | No       |
| 44   | Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of  |                |          |          |
|      | Form 990-EZ   | 44             | <u> </u> |          |
| 45   | Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If  |                |          |          |
|      | "Yes," Form 990 must be completed instead of Form 990-EZ  | 45             | <u></u>  | <u> </u> |
|      | Fo  | rm <b>99</b> ( | D-EZ     | /(20     |

Part VI

|                | and complete the tables for lines 50 ar   | 47(a)(1) nonexempt char<br>1d 51.                              | ntable trusts mus            | Lanswer questio   | 115 40-    | <del>-4</del> 9L | ,         |  |
|----------------|---|--|------------------------------|---|------------|------------------|-----------|--|
|                | Did the organization engage in direct or indirect candidates for public office? If "Yes," complete  | t political campaign activit                                   | ies on behalf of or          | in opposition to  | 46         | /es              | No        |  |
|                | •   |  | adula C. Part II             |   | 47         | -                |           |  |
|                | Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  |  |                              |   |            |                  |           |  |
|                |   |  |                              |   |            |                  |           |  |
|                | If "Yes," was the related organization a section !  |  | · · · · · · ·                |   | 49a<br>49b |                  |           |  |
|                | Complete this table for the organization's five hi  | ighest compensated emplo                                       |                              |   |            |                  |           |  |
|                | employees) who each received more than \$100,   |  |                              | <del></del>   |            |                  |           |  |
|                | (a) Name and address of each employee paid more than \$100,000  | (b) Title and average<br>hours per week<br>devoted to position | (c) Compensation             | (d) Contributions to<br>employee benefit plans &<br>deferred compensation |            | ellowa           | nd        |  |
| f              | Total number of other employees paid over \$10  | 0.000  | 8                            |   |            |                  |           |  |
| 51             | Complete this table for the organization's five \$100,000 of compensation from the organization (a) Name and address of each independent contractor                   | on. If there is none, enter "I                                 | None."                       | ors who each reco   | eived r    |                  |           |  |
| d              | Total number of other independent contractors   | -  |                              | 8   |            |                  |           |  |
| Sign<br>Here   | Under penalties of penjury, I declare that I have examinand belief, it is true, correct, and complete Declaration  Signature of officer  Type or print name and title | n of preparer (other than officer) is                          | Leptich                      |   | any kno    | wledg            |           |  |
| Paid<br>Prepar | Preparer's signature  | Date 4   | Check if self-<br>employed ▶ | Preparer's identifying nu   | mber (See  | instruc          | ctions)   |  |
| Use Or         | yours if self-employed),  | ·····  | Ell                          |   |            |                  |           |  |
| May th         | address, and ZIP + 4  | vn above? See instructions                                     |                              |   | Yes        |                  | No (2000) |  |
|                |   |  |                              | FC  | Jee mir    | <u>ہے۔,</u>      | . (ZUU9)  |  |

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section

## **SCHEDULE A** (Form 990 or 990-EZ)

## **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.

OMB No 1545-0047 Open to Public

| Department of the Treasury<br>Internal Revenue Service |  |   | ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.  |  |   |   |   |  |  |  | Open to Public<br>Inspection |  |  |
|--|--|---|--|--|---|---|---|--|--|--|------------------------------|--|--|
| - 1  |  | the organization  | Schools Fr   | ounder Hom   |   |   |   |  |  |  | tion number<br>027           |  |  |
| Pa   | rt I   | Reason  | for Public Ch  | arity Status (All or   | ganizatio   | ons mus                                   | t compl                                     | ete this                                     | part.) Se  | e instruc                                | ctions.                      |  |  |
| The 1 2 3 4  |  | A church, co<br>A school des<br>A hospital or<br>A medical re<br>hospital's na  | onvention of chu<br>scribed in <b>section</b><br>r a cooperative has<br>esearch organizatime, city, and st |  | of church<br>tach Scho<br>lization d<br>unction v | hes desciedule E.) escribed with a ho     | ribed in s<br>in <b>sectio</b><br>spital de | n 170(b)(scribed in                          | 70(b)(1)(/<br>(1)(A)(iii).<br>n section                                | A)(i).<br>i 170(b)(1                     |                              |  |  |
| 5<br>6   | _  | 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.) |  |  |   |   |   |  |  |  |                              |  |  |
| 7 8 9  | described in section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) |   |  |  |   |   |   |  |  |  |                              |  |  |
| 10<br>11<br>e  |  |   |  |  |   |   |   |  | (a)(2). See <b>section</b> ough 11h.  Type III-Other more disqualified |  |                              |  |  |
| f<br>g   |  | organization  | , check this box<br>st 17, 2006, has   | a written determinati  |   |   |   |  |  |  | III supporting               |  |  |
|  |  |   |  |  |   | 11g(ii)                                   |   |  |  |  |                              |  |  |
| (i)  |  | e of supported ganization   | (ii) EIN   | (iii) Type of organization<br>(described on lines 1-9<br>above or IRC section<br>(see instructions)) | in col. (i) la                                    | organization<br>sted in your<br>document? | the organ                                   | ou notify<br>nization in<br>of your<br>port? | organizat<br>(i) organi  | s the<br>tion in col<br>zed in the<br>S? | (vii) Amount of<br>support   |  |  |
|  |  |   |  |  | Yes   | No  | Yes   | No   | Yes  | No                                       |                              |  |  |
|  |  |   |  |  |   |   |   |  |  |  |                              |  |  |
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|  |  |   | I  | I  | 1   | l   | I   | ŀ  | Ī  | 1  |                              |  |  |

**Total** 

| Pai     | Support Schedule for Org<br>(Complete only if you chec  |                                 |                                    |   |   | and 170(b)(                                      | 1)(A)(vi)      |
|---------|---|---------------------------------|------------------------------------|---|---|--|----------------|
| Sec     | tion A. Public Support  |                                 |                                    |   | <i>.</i>                                  |  |                |
| Ca      | lendar year (or fiscal year beginning in) 🕨   | (a) 2005                        | <b>(b)</b> 2006                    | (c) 2007                                | (d) 2008                                  | <b>(e)</b> 2009                                  | (f) Total      |
| 1       | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  |                                 |                                    |   |   |  |                |
| 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  |                                 | 1                                  |   |   | <b>_</b>   |                |
| 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) |                                 |                                    |   |   |  |                |
| 6_      | Public support. Subtract line 5 from line 4.  |                                 |                                    |   |   |  |                |
| Sec     | tion B. Total Support   |                                 |                                    |   |   |  |                |
| Ca      | lendar year (or fiscal year beginning in) 🕨   | (a) 2005                        | <b>(b)</b> 2006                    | (c) 2007                                | (d) 2008                                  | (e) 2009   | (f) Total      |
| 7       | Amounts from line 4   |                                 | ļ                                  |   |   |  |                |
| 8       | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  |                                 |                                    |   |   |  |                |
| 9       | Net income from unrelated business activities, whether or not the business is regularly carried on  |                                 |                                    |   |   |  |                |
| 10      | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)   |                                 |                                    |   |   |  |                |
| 11      | Total support. Add lines 7 through 10 .   | <u> </u>                        | <u> </u>                           | <u> </u>                                |   | <del>                                     </del> |                |
| 12      | Gross receipts from related activities, etc   |                                 |                                    |   |   | 12   |                |
| 13      | First five years. If the Form 990 is for organization, check this box and stop he   | re                              | <u></u>                            | nd, third, fourth                       |   |  |                |
| Sec     | tion C. Computation of Public Su  |                                 | <del> </del>                       |   |   | т т  |                |
| 14      | Public support percentage for 2009 (line  |                                 | · <del>-</del>                     | 1, column (f))                          |   | 14   | <u>%</u>       |
| 15      | Public support percentage from 2008 Sc  | •                               | -                                  |   |   | 15   | <u>%</u>       |
| 16a     | 33% % support test—2009. If the organiand stop here. The organization qualifies   |                                 |                                    |   |   |  |                |
| b       | 33% % support test—2008. If the organic box and stop here. The organization qua   |                                 |                                    |   |   | 33% % or more                                    |                |
| 17a     | 10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum"   | acts-and-circu                  | mstances" test,                    | check this box                          | and stop here                             | . Explain in Parl                                | IV how the     |
| b<br>18 | 10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstate organization did private foundation. If the organization did          | acts-and-circurances" test. The | nstances" test,<br>organization qu | check this box a<br>alifies as a public | and <b>stop here.</b><br>cly supported or | Explain in Part ganızatıon .                     | IV how the ▶ □ |

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

| Sec      | tion A. Public Support   |                        |                        |                   |                  | · · · · · · · · · · · · · · · · · · · |                  |
|----------|--|------------------------|------------------------|-------------------|------------------|---------------------------------------|------------------|
|          | llendar year (or fiscal year beginning in)   | (a) 2005               | <b>(b)</b> 2006        | (c) 2007          | (d) 2008         | (e) 2009                              | (f) Total        |
| Ca       | nendar year (or iiscai year beginning iii)   | (a) 2005               | (D) 2000               | (6) 2007          | (a) 2008         | (e) 2009                              | (i) Total        |
| 1        | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   | 24851                  | 30646                  | 28078             | 27591            | 19587                                 | 130753           |
| 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 | 33519                  | 44002                  | 43200             | 46959            | 57241                                 | 22492/           |
| 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   | 58370                  | 74648                  | 71278             | 74550            | 76828                                 | 355674           |
| 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  | 0                      | 0                      | 0                 | 0                | 0                                     | 0                |
| 8        | Public support (Subtract line 7c from line 6.)   | 58370                  | 74648                  | 71278             | 74550            | 76828                                 | 355674           |
|          | tion B. Total Support  |                        |                        |                   |                  |                                       |                  |
| Ca       | alendar year (or fiscal year beginning in) 🕨   | (a) 2005               | <b>(b)</b> 2006        | (c) 2007          | (d) 2008         | (e) 2009                              | (f) Total        |
| 9        | Amounts from line 6  | 58370                  | 74648                  | 71278             | 74550            | 76828                                 | 355674           |
| 10a      | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   | 290                    | 241                    | 72                | 50               | 16                                    | 669              |
| b        | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  |                        |                        | /                 | /                |                                       |                  |
| C        | Add lines 10a and 10b  | 291                    | 241                    | フユ                | 50               | 16                                    | 669              |
| 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       | <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)  | 58660                  | 74889                  | 71350             | 74600            | 76844                                 | 356343           |
| 14       | First five years. If the Form 990 is for organization, check this box and stop   | here                   | <u> </u>               |                   | •                | ear as a section                      | ` ' ' ' ' '      |
| Sec      | tion C. Computation of Public Su   | pport Perce            | ntage                  |                   |                  |                                       |                  |
| 15<br>16 | Public support percentage for 2009 (lir<br>Public support percentage from 2008   | Schedule A, Pa         | art III, line 15       | ne 13, column     |                  | 15<br>16                              | 99.8 %<br>75.8 % |
| Sec      | tion D. Computation of Investme  | nt Income P            | ercentage              |                   |                  |                                       |                  |
| 17       | Investment income percentage for 200   | <b>9</b> (line 10c, co | lumn (f) dıvıde        | d by line 13, c   | column (f)) .    | 17                                    | 0 %              |
| 18       | Investment income percentage from 20   |                        |                        |                   |                  | 18                                    | 0 %              |
| 19a      | 331/3 % support tests - 2009. If the org 17 is not more than 331/3 %, check this b   | oox and stop h         | e <b>re.</b> The organ | izatıon qualifıe  | s as a publicly  | supported orga                        | anization ►      |
| b        | 331/3 % support tests—2008. If the organ line 18 is not more than 331/3 %, check this  | s box and <b>stop</b>  | here. The orga         | ınization qualıfi | es as a publicly | supported orga                        | nization 🕨 🔲     |
| 20       | Private foundation. If the organization  | did not check          | a box on line          | 14 19a or 19b     | o, check this b  | ox and see ins                        | tructions ▶ □    |

|         | orm 990 or 990-EZ) 2009 Page <b>4</b>  |
|---------|--|
| Part IV | <b>Supplemental Information.</b> Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions. |
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# JUANITA SCHOOLS FOUNDATION SCHEDULE 2009-2010

#### Part I

#### 10. Grants and similar amounts

a. Support of an outdoor science program for 5<sup>th</sup> grade students at Juanita Elementary – 9635 NE 132<sup>nd</sup> St, Kirkland, WA 98034 \$10,990.00 Camp Islandwood 3,301.77 Donated stipend

b. Lake Washington School District

\$ 8,116.00 Support for volunteer coordinator at Juanita El 4,083.00 Support for District lunch buddy program 1,006.00 Support for tech programs at Juanita El

c. Juanita Elementary

4,323.00 Donation to support reading program 2,094.00 Donation to support music and PE activities 1,798.00 Donation to support art program and building