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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2009

Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceUnder 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

A For the 2009 calendar year, or tax year beginning September 1 , 2009, and ending August 31 , 2010					
B Check if applicable		C Name of organization WA Family Career & Comm. Leaders of America		D Employer identification number 91 6049128	
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Please use IRS label or print or type Doing Business As Washington FCCLA Number and street (or P O box if mail is not delivered to street address) 519 Johnson Tower/ PO Box 644852 Room/suite City or town, state or country, and ZIP + 4 Washington State University, Pullman, WA 99164-4852 F Name and address of principal officer Deborah J Handy, 519 Johnson Tower, PO Box 644852, Pullman, WA 99164-4852		E Telephone number () G Gross receipts \$ 223,986	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
J Website: ► http://washingtonfccla.tripod.com/index.html		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		H(c) Group exemption number ►			
L Year of formation 1945		M State of legal domicile WA			

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
To promote personal growth and leadership through family and consumer sciences education.

- 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** **0**
- 5 Total number of employees (Part V, line 2a) **5** **0**
- 6 Total number of volunteers (estimate if necessary) **6** **2,500**
- 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
8 Contributions and grants (Part VIII, line 1h)	13,026	12,936
9 Program service revenue (Part VIII, line 2g)	183,316	210,398
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,514	652
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	54	
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	197,910	223,986

	Prior Year	Current Year
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13,026	12,936
14 Benefits paid to or for members (Part IX, column (A), line 4)	183,316	210,398
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,514	652
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) RECEIVED	199,115	221,109
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	199,115	221,109
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) DEC 08 2010	(1,205)	2,877
19 Revenue less expenses. Subtract line 18 from line 12		

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	212,846	215,566
21 Total liabilities (Part X, line 26)	1,427	1,270
22 Net assets or fund balances Subtract line 21 from line 20	211,419	214,296

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

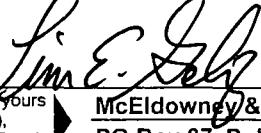
Signature of officer

Deborah J Handy

12-2-10

Type or print name and title

Deborah J Handy, Executive Director

Paid Preparer's Use Only	Preparer's signature 	Date 12/1/10	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) P00850658
	Firm's name (or yours if self-employed), address, and ZIP + 4 McElowney & McElowney, PS PO Box 87, Pullman, WA 99163	EIN ► 37 1461092		
		Phone no ► (509) 332-6541		

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

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

Cat. No. 11282Y

Form 990 (2009)

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

Focusing on the multiple roles of family member, wage earner and community leader, members develop skills for life through character development; creative and critical thinking; interpersonal communications; practical knowledge; and career preparation.

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 \$ 30,251 including grants of \$) (Revenue \$)
State and Regional Meetings

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4b (Code:) (Expenses \$ 143,441 including grants of \$) (Revenue \$)
Participating in National Meetings

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4c (Code) (Expenses \$ 8,139 including grants of \$) (Revenue \$)
Leadership Training

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4d Other program services (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 181,831

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors?
- 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
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 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
- 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
- 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
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 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
- 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
- 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
- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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
- 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.
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - 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
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III
- 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
- 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
- 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
- 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	Yes	No
1	✓	
2		✓
3		✓
4		✓
5		
6		✓
7		✓
8		✓
9		✓
10		✓
11		✓
12		✓
13		✓
14a		✓
14b		✓
15		✓
16		✓
17		✓
18		✓
19		✓
20		✓

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	✓
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	✓
23	Did the organization answer "Yes" to Part VII, Section A, line 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	✓
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 lines 24b through 24d and complete Schedule K If "No," go to line 25.	24a	✓
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	✓
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	✓
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	✓
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	✓
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).	28a	✓
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	✓
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	29	✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	✓
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	34	✓
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	35	✓
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	36	✓
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	37	✓
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	38	✓
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		

Part V Statements Regarding Other IRS Filings and Tax Compliance

- 1a. Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable

1a	0
1b	0
- 1b. Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable

1c	
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- c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

2a	0
2b	
- 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
2b	
- 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)*

3a	✓
3b	
- 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

4a	✓
5a	✓
5b	✓
5c	
- b. If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O

6a	✓
6b	
- 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)?

7a	✓
7b	
- 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

7c	✓
7d	
- 5a. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

7e	✓
7f	✓
7g	✓
7h	
- b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

8	
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- 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?

9a	
9b	
- 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?

10a	NA
10b	NA
- b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

11a	NA
11b	NA
7. **Organizations that may receive deductible contributions under section 170(c).**

12a	✓
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- 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	✓
7b	
- b. If "Yes," did the organization notify the donor of the value of the goods or services provided?

7c	✓
7d	
- c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

7e	✓
7f	✓
7g	✓
7h	
- d. If "Yes," indicate the number of Forms 8282 filed during the year

8	
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- e. Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

9a	
9b	
- f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

10a	NA
10b	NA
- g. For all contributions of qualified intellectual property, did the organization file Form 8899 as required?

11a	NA
11b	NA
- h. For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?

12a	✓
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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?

12b	
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9. **Sponsoring organizations maintaining donor advised funds.**

12b	
-----	--
- a. Did the organization make any taxable distributions under section 4966?

10a	NA
10b	NA
- b. Did the organization make a distribution to a donor, donor advisor, or related person?

11a	NA
11b	NA
10. **Section 501(c)(7) organizations.** Enter

12a	✓
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- a. Initiation fees and capital contributions included on Part VIII, line 12.

10a	NA
10b	NA
- b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

11a	NA
11b	NA
11. **Section 501(c)(12) organizations.** Enter

12a	✓
-----	---
- a. Gross income from members or shareholders

10a	NA
10b	NA
- b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

11a	NA
11b	NA
- 12a. **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?

12b	
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- b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year.

12b	
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Part VI. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

- 1a Enter the number of voting members of the governing body 1a 27
 b Enter the number of voting members that are independent 1b 0
- 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 ✓
- 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 ✓
- 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 ✓
- 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 ✓
- 6 Does the organization have members or stockholders? 6 ✓
- 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a ✓
 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b ✓
- 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
 a The governing body? 8a ✓
 b Each committee with authority to act on behalf of the governing body? 8b ✓
- 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 9a ✓

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

- 10a Does the organization have local chapters, branches, or affiliates? 10a ✓
 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 ✓
- 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990
- 12a Does the organization have a written conflict of interest policy? If "No," go to line 13.
 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12a ✓
 c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12b ✓
 12c ✓
- 13 Does the organization have a written whistleblower policy? 13 ✓
- 14 Does the organization have a written document retention and destruction policy? 14 ✓
- 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
 b Other officers or key employees of the organization
 If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 15a ✓
 15b
- 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?
 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? 16a ✓
 16b

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► **NONE**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 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
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► **Deborah J Handy, 519 Johnson Tower, PO Box 644852, Washington State University, Pullman, WA 99164-4852**

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. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees, and former such persons.

Check this box if the organization did not compensate any current officer, director, or trustee

(A) (B) (C) (D)

Part VII. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

1b Total

- 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 ► 0

	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	✓
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	✓
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	✓

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

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			
	1b Membership dues	1b	12,936		
	1c Fundraising events	1c			
	1d Related organizations	1d			
	1e Government grants (contributions)	1e			
	1f All other contributions, gifts, grants, and similar amounts not included above	1f			
	1g Noncash contributions included in lines 1a-1f \$				
	1h Total. Add lines 1a-1f		12,936		
Program Service Revenue	2a National Meetings	Business Code 900099	141,135	141,135	
	2b Regional	900099	12,946	12,946	
	2c Leadership Meetings	900099	51,521	51,521	
	2d Leadership Training	900099	1,357	1,357	
	2e Scholarships	900099	990	990	
	2f All other program service revenue	900099	2,449	2,449	
	2g Total. Add lines 2a-2f		210,398		
	3 Investment income (including dividends, interest, and other similar amounts)		652		652
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross Rents	(i) Real	(ii) Personal			
6b Less rental expenses					
6c Rental income or (loss)					
6d Net rental income or (loss)					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
7b Less cost or other basis and sales expenses					
7c Gain or (loss)					
7d Net gain or (loss)					
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
8b Less direct expenses	b				
8c Net income or (loss) from fundraising events					
9a Gross income from gaming activities. See Part IV, line 19	a				
9b Less direct expenses	b				
9c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a				
10b Less cost of goods sold	b				
10c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				
11a					
11b					
11c					
11d All other revenue					
11e Total. Add lines 11a-11d		223,986	210,398	652	0
12 Total revenue. See instructions.					

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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
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				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	650		650	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	218,501	181,831	36,670	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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 Supplies	958		958	
b Scholarships	1,000		1,000	
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	221,109	181,831	39,278	
26 Joint costs. Check here ► <input type="checkbox"/> 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	169,137	1	171,272
2	Savings and temporary cash investments	43,598	2	44,183
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
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	111	8	111
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or 10a other basis Complete Part VI of Schedule D			
b	Less: accumulated depreciation 10b		10c	
11	Investments—publicly traded securities		11	
12	Investments—other securities. See Part IV, line 11		12	
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	212,846	16	215,566
Liabilities				
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue	1,427	19	1,270
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	1,427	26	1,270
Net Assets or Fund Balances				
	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> 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	211,419	33	214,296
34	Total liabilities and net assets/fund balances	212,846	34	215,566

Part XI Financial Statements and Reporting

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? . . .

b Were the organization's financial statements audited by an independent accountant? . . .

c If "Yes" to line 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.

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 separate 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? . . .

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.

	Yes	No
2a	✓	
2b	✓	
2c		
3a	✓	
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

**Open to Public
Inspection**

Employer identification number

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 | <input type="checkbox"/> A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) . |
| 2 | <input type="checkbox"/> A school described in section 170(b)(1)(A)(ii) . (Attach Schedule E) |
| 3 | <input type="checkbox"/> A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii) . |
| 4 | <input type="checkbox"/> 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 | <input type="checkbox"/> 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 | <input type="checkbox"/> A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v) . |
| 7 | <input type="checkbox"/> 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 | <input type="checkbox"/> A community trust described in section 170(b)(1)(A)(vi) . (Complete Part II) |
| 9 | <input checked="" type="checkbox"/> 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 | <input type="checkbox"/> An organization organized and operated exclusively to test for public safety. See section 509(a)(4) . |
| 11 | <input type="checkbox"/> 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 <input type="checkbox"/> Type I b <input type="checkbox"/> Type II c <input type="checkbox"/> Type III—Functionally integrated d <input type="checkbox"/> Type III—Other |
| e | <input type="checkbox"/> 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 <input type="checkbox"/> |
| g | Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? |
| | (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 supported organization? <input type="checkbox"/> |
| | (ii) A family member of a person described in (i) above? <input type="checkbox"/> |
| | (iii) A 35% controlled entity of a person described in (i) or (ii) above? <input type="checkbox"/> |
| h | Provide the following information about the supported organization(s). |

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

Part II. Support Schedule for Organizations Described in Sections 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.")						
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						
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.						

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						
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						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33½% support test—2009. If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33½% support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		

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.)

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")	16,757	14,846	14,575	13,026	12,936	72,140
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	16,757	14,846	14,575	13,026	12,936	72,140
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)						72,140

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	16,757	14,846	14,575	13,026	12,936	72,140
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,436	1,464	1,675	1,514	652	6,741
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,436	1,464	1,675	1,514	652	6,741
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.)	18,193	16,310	16,250	14,540	13,588	78,881
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	91.5 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	91.9 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	8.5 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	8.1 %
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 ► <input checked="" type="checkbox"/>		
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 ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV. Supplemental Information. 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

**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

2009Open to Public
Inspection

Name of the organization

Washington Family Career & Community Leaders of America

Employer identification number

91 6049128**Part VI, Section A, Line 9****The following officers can be reached at the addresses listed below.****President: Taylor Dale Vance, C/O Advisor Kathi Hendrix, Selah High School, 801 N. 1st St, Selah, WA 98942****Director of Finance: Anna Nguyen, C/O Advisor Susan Grant, Ingraham High School, 1819 N 135th St, Seattle, WA 98133****Secretary: Sydnee Freeman, C/O Advisor Debbie Romesburg, Clarkston High School, 401 Chestnut, Clarkston, WA 99403****Part VI, Section B, Line 11**

The organization is run entirely by volunteers. All record keeping is computed, checked, reconciled, and reviewed by multiple parties (in order to constitute better internal control). At year end, the appropriate third-parties are contacted in order to clarify ending balances for balance sheet accounts. The CPA reviews the materials and makes year end adjustments (removing the CPA's independence). Preparation of the Form 990 and its supporting schedules is completed using the accounting records, and is supplemented with background information gathered from questions. The organization's State Administrator is contacted to review the return. If the return is correct, it is signed and filed. Copies of the final return are given to the Administrator and are kept for public inspection upon request.

Part VI, Section C, line 19

Governing documents, bylaws, conflict of interest policies and tax returns are kept at Washington State University. They are available upon request only.