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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545 0047 2011

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For	the 2011 caler	dar year, or tax year beginning , 2011, and ending		
В	Check	k if applicable	C	D Employer Ident	ification Number
		Address change	OneAmerica	20-0384	893
	$-\Box$	Name change	1225 S. Weller Street #430	E Telephone num	ber
	Π,	Initial return	Seattle, WA 98144	(206) 7	23-2203
	Π·	Ternxnated		· · · · · · · · · · · · · · · · · · ·	
	\square	G Gross receipts	\$ 1,784,072.		
	\square	ns a group return for aff			
				all affiliates included?	Yes No
ī	Tax	x-exempt status	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	o,' attach a list (see ins	structions)
J				up exemption number	•
K		rm of organization:	X Corporation Trust Association Other ► L Year of Formation 20		legal domicile WA
P	art I	Summa	y		
	1	Briefly descr	ibe the organization's mission or most significant activities To advance de	mocracy and	ljustice
•		through	building power in immigrant communities, in collaboration	oration with	h kev allies.
N I & WOLC.					
J					
SION A A MOU	2				
3 "	3		oting members of the governing body (Part VI, line 1a) ndependent voting members of the governing body (Part VI, line 1b)	3 4	
× §	5		r of individuals employed in calendar year 2011 (Part V, line 2a)	5	10 32
= ₹ }	6		r of volunteers (estimate if necessary)	6	620
z 8	7.		ed business revenue from Part VIII, column (C), line 12	7a	0.
₹.			d business taxable income from Form 990-T, line 34	7b	0.
$\tilde{}$				Prior Year	Current Year
3 .	8	Contribution	s and grants (Part VIII, line 1h)	2,163,548.	1,660,906.
Z 3	9	Program ser	vice revenue (Part VIII, line 2g)		96,162.
Sevenue Revenue	10		ncome (Part VIII, column (A), lines 3, 4, and 7d)	92.	280.
4	1 ''		ie (Part VIII, column (A), lines 5, 6d, 8c, 9c 10c, and Her EIV (투)	-14,069.	-32,480.
OZENED Berenue	12		e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,149,571.	1,724,868.
10	13		similar amounts paid (Part IX, column (A), In (B) 1-3)	197,547.	160,978.
	14		to or for members (Part IX, column (A), Inex MAY 1 4.2012		
9	15		er compensation, employee benefits (Part X, column (A), lines 5-10)	920,900.	1,184,342.
Frances	16	a Professional	fundraising fees (Part IX, column (A), line 1e) OGDEN. UT	27,500.	
,		b Total fundra	sing expenses (Part IX, column (D), line 25)		
μ	17	Other expen	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	806,003.	_1,033,712.
	18	Total expens	ses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,951,950.	2,379,032.
	19	Revenue les	s expenses Subtract line 18 from line 12	197,621.	-654,164.
8	ž		Begin	ning of Current Year	End of Year
Net Assets or	20	Total assets	(Part X, line 16)	1,350,523.	730,078.
4	21	Total habiliti	es (Part X, line 26)	60,189.	93,908.
			r fund balances Subtract line 21 from line 20	1,290,334.	636,170.
P	art II	l Signatu	re Block		
Ų	nder per	nalties of perjury, I	declare that I have examined this return, including accompanying schedules and statements, and to the best of perer (other than officer) is based on all information province preparer has any knowledge	of my knowledge and be	lief, it is true, correct, and
_	-	/	Add a day who weekly a special of the morning proporting any knowledge		
_		Sudd at	ure of officer	Date -	
	ign ere	1 7	PRAMILA JAYAPA, EXEC DIR	~ //2/1	2
• • • • • • • • • • • • • • • • • • • •	CI C	Type C	r print name and lillo,	> / / / '	
_			preparer's name Proparer's signature Date	Charle 2	PTIN
_		1		Checkif	
	aid repai			self employed	P00281100
	repai se O			 Firm's EIN ► 20	-5828888
•		Firm's add			
	314 Ab -	IDC diagnes 4		Phone no (20	
_			his return with the preparer shown above? (see instructions) Reduction Act Notice, see the separate instructions. TEFA0113.		X Yes No Form 990 (2011)
D)	~~ r(or raperwork I	Reduction Act Notice, see the separate instructions. TEEA0113L	UD/10/11	1 0000 220 (2011)



		(2011)		20-0	38489	3	Page 2
Par	t III	Staf	tement of Program Service Accomplishments				
			ck if Schedule O contains a response to any question in this Part III				X
1		,	cribe the organization's mission				
			nce democracy and justice through building power in immigu	rant c	ommun:	<u>ities,</u>	<u>_in_</u> _
	_col	labo	ration with key allies.				
			·				
	<u> </u>						
2			anization undertake any significant program services during the year which were not listed oi r 990-EZ? See Schedule O	1 the prio		v	1
			r 990-EZ? See Schedule 0 scribe these new services on Schedule O		X	Yes _] No
2			anization cease conducting, or make significant changes in how it conducts, any program sei	nuoce?		Yes X	No
3			scribe these changes on Schedule O	vices:		ies V] 140
4			e organization's program service accomplishments for each of its three largest program serv	1000 3C 1	maacura	d by ava	oncoc
_	Secti	on 501	(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the ar	nount of	grants a	nd alloca	itions to
	other	s, the	total expenses, and revenue, if any, for each program service reported				
4a	(Code		(Expenses \$ 1,231,423. including grants of \$ 160,978.)	evenue	\$	96,	<u>162.</u>)
	<u>See</u>	Sche	<u>edule_0</u>				
			·				
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			·				
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4 h	(Code	<u> </u>) (Expenses \$ 674,503. including grants of \$) (R	Povonuo	<u> </u>		
70	-						
	566	. 5010	<u>edule_0</u>				
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			· · · ·				-
4 c	(Code	е. 🗌) (Expenses \$ including grants of \$) (R	evenue	\$		
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			·				
	<u> </u>		(D) + 1 + 0 + 1 + 0 + 1 + 0 + 0 + 1 + 0 + 0				
4d			am services (Describe in Schedule O.)				
A =		enses	\$ including grants of \$) (Revenue \$ am service expenses > 1,905,926				
40	I OTAL	oroor	am Service expenses ▶ 1. 900. 970.				

Form 990 (2011) OneAmerica

20-0384893

Form 990 (2011) OneAmerica
Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
1	b 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	11 b		Х
•	c 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	11 c		Х
	d 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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u> </u>
1	f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	Х	<u>-</u>
١	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12Ь		х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
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, Parts III and IV	16		Х
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 (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		<u>x</u>
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
١	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		

Form 990 (2011) OneAmerica

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	х	
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		x
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
ŧ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 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		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	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		Х
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		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	ļ	X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .	28b		х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part l	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990	(2011)

Form 990 (2011) OneAmerica 20-	0384893	P	age :
Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V			
		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	17		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable g (gambling) winnings to prize winners?	amıng 1 c	x	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
ments, filed for the calendar year ending with or within the year covered by this return	32	,	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<u>2b</u>	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	_ !		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account)?	over, a 4a		Х
b If 'Yes,' enter the name of the foreign country			
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> X</u>
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
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?	ation 6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts not tax deductible?	 -		
7 Organizations that may receive deductible contributions under section 170(c).	- 60		
• • • • • • • • • • • • • • • • • • • •			
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?	1 7a	х	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
Form 8282?	7c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	.		
Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Establishment of supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	Did the ss 8		
9 Sponsoring organizations maintaining donor advised funds.	-		
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		ľ	
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders.			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O	.54		
b Enter the amount of reserves the organization is required to maintain by the states in			
which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			47
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	146		

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Par	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b bel a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan Schedule O. See instructions.	ow, a ges i	and i n	for X							
Sec	Check if Schedule O contains a response to any question in this Part VI tion A. Governing Body and Management] <u>v</u>]							
<u> </u>	aon A. Governing Body and management		Yes	No							
1 a	In Enter the number of voting members of the governing body at the end of the tax year lift there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		103								
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10			1							
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		х							
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		х							
4	4 Did the organization make any significant changes to its governing documents										
_	since the prior Form 990 was filed?	<u>4</u> 5		X							
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?										
6	Did the organization have members or stockholders?	6		Х							
	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?										
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?										
	the following: See Schedule 0										
	a The governing body? b Each committee with authority to act on behalf of the governing body?										
9											
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		<u> </u>							
			Yes	No							
10 a	Did the organization have local chapters, branches, or affiliates?	10a		X							
t	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
	11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
t	Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O										
12a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	<u> X</u>	<u> </u>							
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	ļ							
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done See Schedule O	12c	<u>X</u>								
	Did the organization have a written whistleblower policy?	13	X	<u> </u>							
	Did the organization have a written document retention and destruction policy?	14	Х	 							
	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?		v								
	In The organization's CEO, Executive Director, or top management official See Schedule 0 Other officers of key employees of the organization See Schedule 0	15a 15b	X	 							
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)	130		 							
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		x							
t	olf 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ► None										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) are inspection. Indicate how you make these available. Check all that apply	vaılabi	e for	public							
	Own website X Upon request										
	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available during the tax year See Schedule O										
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization Crosby 1225 S. Wollow Street, Suite 430, Soattle WA 99144 (206) 722-										
BAA	-Juliet Crosby 1225 S. Weller Street, Suite 430 Seattle WA 98144 (206) 723-			 (2011)							

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

Check if Schedule O contains a response to any question in this Part VII

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.
- 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, if any 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 neither the organization	n nor any	relate	d or	gan	ızat	ion co	mpe	ensated any current o	fficer, director, or trus	stee.
					C)					
(A) Name and title	(B) Average hours per week	unles	s per	direc	s bot	an one h an officustee)	cer	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099 MISC)	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099 MISC)	compensation from the organization and related organizations
_(1)_Luis_Fraga	1		i						_	_
President	1	X	_	X				0.	0.	0.
(2) M. Lorena González Vice President	1	Х		Х				0.	0.	0.
(3) Hardeep Singh Rekhi	1									
Secretary	1	X		Х				0.	0.	0.
(4) LeeAnn Hall Treasurer	1	х		Х				0.	0.	0.
(5) Ann Benson Director	1	X						0.	0.	0.
(6) Sudha Nandagopal Director	1	Х						0.	0.	0.
(7) Mark McDermott	 		-					0.	0.	<u> </u>
Director	1	х						0.	0.	0.
(8) Michele Storms Director	1	Х						0.	0.	0.
(9) Abdullahi Jama Director	1	х						0.	0.	1,179.
(10) De'Sean Quinn										
Director	1	Х						0.	0.	0.
(11) Jorge Madrazo Director	1	Х						0.	0.	0.
(12) Han Nachtrieb Director	1	x						0.	0.	0.
(13) Claudia Kauffman										
Director (14) Pramila Jayapal	1	Х	$\vdash\vdash$					0.	0.	0.
Exec. Dir.	40			Х				100,000.	0.	6,737.
					_					

Form 990 (2011) OneAmerica		,	_						20-038489			Page 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)												
(A) Name and title	(B) Average hours per	box	, unle cer ar	Pos heck ss pe	rtion more rson Irrecto	than is both or/trus	h an itee)	(D) Reportable compensation from	(E) Reportable compensation from related organizations	am	(F) Estimate ount of o	ther
1	per week (describ e hours for related organi- zations	or direct	Institutional	Officer	Key emp	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	٥	from the rganization and relation ganization	on ed
•	for related organi-	or truste	mal trust		employee	comper					J	
	Sch O)	l ag	stee			sated						
(15)												
<u>(16)</u>		<u> </u>										
<u></u>												
<u>(18)</u>												
(19)										_		
(20)												
(21)												
(22)												
(23)												-
(24)												
(25)												
1 b Sub-total							>	100,000.	0.		7,	916.
c Total from continuation sheets to Part VII, Section	A						>	0.	0.			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limite	d to the	ose I	ıste	d ab	ove)) who	o re	100,000. ceived more than	\$100,000 of reports	able co		916. sation
from the organization 0											10	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	or trus	tee,	key	em	ploy	ee, o	or h	ighest compensat	ed employee	3	Yes	X
For any individual listed on line 1a, is the sum of re the organization and related organizations greater the organization.	portabl	e co	mpe	ensa	tion	and	oth	ner compensation	from	3		1-
such individual 5 Did any person listed on line 1a receive or accrue of									individual	4	-	x
for services rendered to the organization? If 'Yes,' or	comple	te S	chec	lule	J fo	r suc	ch p	person		5		Х
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ed inde	epen	den	cor	ntrac	tors	tha	it received more t	han \$100,000 of			
compensation from the organization Report compe	nsation	for	the	cale	nda	r yea	ar e	nding with or with	in the organization			
(A) Name and business addres	s							Description	of services	Comp	(C) ensatio	on
OrangeGerbera Inc. 12273 Shorewood Drive SW	Seatt1	le,	WA	981	46			Development			105,	<u>630.</u>
												-
2 Total number of independent contractors (including		t Iım	ıted	to t	hose	list	ed a	above) who receiv	ed more than		····	
\$100,000 in compensation from the organization	T											

1 41	t viii Statement of Nevenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	the Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns la-lf b Total Add lines la-lf	1 660 006			
PROGRAM SERVICE REVENUE	h Total. Add lines 1a-1f Business Code 2a Conference Registration 611430 b Translation Equip. Rental 624100 c d e	94,810. 1,352.	94,810. 1,352.		
ROGR/	f All other program service revenue. g Total. Add lines 2a-2f	96,162.			
	Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal B Less rental expenses c Rental income or (loss)	280.			280.
	d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)				
OTHER REVENUE	8a Gross income from fundraising events (not including \$\frac{152,173}{152,173}\$. of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities.	-32,804.			-32,804.
	See Part IV, line 19 b Less: direct expenses b				
	c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b				
	C Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	324.			224
	b	324.			324.
	d All other revenue e Total. Add lines 11a-11d	324.			
	12 Total revenue. See instructions	1,724,868.	96,162.	0.	-32,200.

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)

-	Check if Schedule O contains a re	esponse to any question			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	160,978.	160,978.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	107,916.	78,779.	15,108.	14,029.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	912,668.	694,489.	128,258.	89,921.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	62,121.	48,155.	5,276.	8,690.
10	Payroll taxes	101,637.	77,115.	13,989.	10,533.
11	Fees for services (non-employees)				
ä	a Management	162,211.	56,581.		105,630.
ŀ	Legal	366.		366.	<u></u>
•	Accounting	12,132.		12,132.	
•	i Lobbying				
•	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
ç) Other	68,917.	55,963.	12,954.	
12	Advertising and promotion	52,434.	49,792.	22.	2,620.
13	Office expenses.	78,458.	59,152.	12,139.	7,167.
14	Information technology	125,720.	116,976.	4,477.	4,267.
15	Royalties				
16	Occupancy	141,418.	125,032.	3,207.	13,179.
17	Travel	54,537.	53,788.	524.	225.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	303,268.	302,745.	352.	171.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	26,592.	21,779.	1,702.	3,111.
	Insurance	7,659.	4,602.	1,587.	1,470.
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
t	` 				· · · · · · · · · · · · · · · · · · ·
	; !				
•	All other expenses				
	Total functional expenses. Add lines 1 through 24e	2,379,032.	1,905,926.	212,093.	261,013.
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		_,		
	Check here ► If following SOP 98-2 (ASC 958-720)				

495,634

794,700

1,290,334.

27

28

29

30

31

32

33

246,170.

390,000.

636,170.

27

31

33

ဝ္ဂ

Unrestricted net assets

lines 30 through 34.

28 Temporarily restricted net assets.

29 Permanently restricted net assets

Total net assets or fund balances

30 Capital stock or trust principal, or current funds

Organizations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Part X Balance Sheet (A) (B) End of year Beginning of year 72,777. 500,877 1 1 Cash - non-interest-bearing 209,327. 363,334 2 2 Savings and temporary cash investments 357,506 337,709. 3 Pledges and grants receivable, net 3 5,451 15,135. 4 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 33,990 20,324. Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule Ω 10a 151,750. $82, \overline{177}$ **b** Less accumulated depreciation 10b 89,365 69,573. 10 c 5,233. 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) 1,350,523 16 730,078. 54,189 17 Accounts payable and accrued expenses 17 82,658. 18 Grants payable 18 6,000 11,250. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 Total liabilities. Add lines 17 through 25 60,189 93,908. 26 Organizations that follow SFAS 117, check here > |X| and complete lines 27 through 29 and lines 33 and 34.

 \$ 34 Total liabilities and net assets/fund balances
 1,350,523. 34
 730,078.

 BAA
 Form 990 (2011)

and complete

Form 990 (2011) OneAmerica 20-038	84893	Pa	age 12					
Part XI Reconciliation of Net Assets								
Check if Schedule O contains a response to any question in this Part XI			\Box					
,								
1 Total revenue (must equal Part VIII, column (A), line 12)		724,8 379,0						
2 Total expenses (must equal Part IX, column (A), line 25)								
3 Revenue less expenses. Subtract line 2 from line 1								
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))								
5 Other changes in net assets or fund balances (explain in Schedule O)	;		0.					
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6								
Part XII Financial Statements and Reporting		<u>636,</u>	-					
Check if Schedule O contains a response to any question in this Part XII								
		Yes	No					
1 Accounting method used to prepare the Form 990 Cash X 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?	2	a	Х					
b Were the organization's financial statements audited by an independent accountant?	21	ЬΧ						
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	c .	x					
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 separate basis, consolidated basis, or both.	on a		ľ					
X 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 require or audits, explain why in Schedule O and describe any steps taken to undergo such audits	d audit	ь						
BAA	For	m 990	(2011)					

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.

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection
Employer identification number

	America								384893			
Par			(All organizations					See i	nstruct	ions.		
	organization is not a priva		•	•		,	,					
1			ciation of churches des		sectio	า 170(b)	(1)(A)(i)					
2			(ii). (Attach Schedule									
3	_ `	•	e organization describe				,,,,					
4	_		in conjunction with a h	nospital	describe	d in sec	tion 17	0(Ь)(1)(А	A)(iii) . Er	nter the ho	spital's	S
5	name, city, and state An organization oper	ated for the benefit o	f a college or university	y owned	or oper	ated by	a gover	nmenta	unit de	scribed in	sectio	n – – ·
6	□ 170(b)(1)(A)(iv). (Complete Part II) □ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)											
8	A community trust de	escribed in section 17	70(b)(1)(A)(vi). (Comple	te Part	1)							
9	from activities related investment income a	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										
10	An organization orga	nized and operated e	exclusively to test for pu	ublic saf	ety See	section	1 509(a)	(4).				
11	more publicly suppor	ted organizations des	exclusively for the bene scribed in section 509(a tion and complete lines	a)(1) or s	section 5	509(a)(2	ctions o	of, or ca section !	rry out th 5 09(a)(3)	he purpose . Check th	s of o	ne or that
	a Type I b Type II c Type III — Functionally integrated d Type III — Other											
е	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)											
f												
g	Since August 17, 200	6, has the organizati	on accepted any gift o	r contrib	ution fr	om any	of the fo	ollowing	persons	;?		
						-		_			Yes	No
	(i) A person who do below, the gove	lirectly or indirectly co erning body of the sup	ontrols, either alone or oported organization?	togethe	with pe	ersons d	escribe	d in (ii)	and (III)	11 g (i)		
	(ii) A family member	er of a person descri	bed in (i) above?							11 g (ii)		
	(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	bove?						11 g (iii)		
h	Provide the following	information about th	e supported organization	on(s).								
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	column (s the ation in Isted in overning ment?	the organ	ou notify nization in n (f) of upport?	(vi) ! organız colun organıze U :	ation in nn (i) ed in the	(vii) Amou	nt of sup	port
				Yes	No	Yes	No	Yes	No			
(A)												
(B)												
(C)												
(D)												
(E)												
Total								:				

Page 2

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 or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support				•		
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')	1,309,464.	2,106,019.	1,420,952.	2,163,548.	1,660,906.	8,660,889.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,309,464.	2,106,019.	1,420,952.	2,163,548.	1,660,906.	8,660,889.
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)						1,551,431.
6	Public support. Subtract line 5 from line 4						7,109,458.
Sec	tion B. Total Support						
Cale begin	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	1,309,464.	2,106,019.	1,420,952.	2,163,548.	1,660,906.	8,660,889.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,043.	5,769.	623.	92.	280.	8,807.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	926.					926.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) See Part IV			3,853.	667.	324.	4,844.
	Total support. Add lines 7 through 10						8,675,466.
12	Gross receipts from related activ	vities, etc (see ins	structions)			12	111,235.
	First five years. If the Form 990 organization, check this box and	stop here	·	nd, third, fourth, o	or fifth tax year as	a section 501(c)	(3)
	tion C. Computation of Pu						
	Public support percentage for 20	•		ne 11, column (f))	14	81.95%
_	Public support percentage from	·				15	81.98%
16a	33-1/3% support test — 2011. If and stop here. The organization	the organization of qualifies as a pu	did not check the blicly supported o	box on line 13, ar rganization	nd the line 14 is 3	3-1/3% or more,	check this box
ь	33-1/3% support test — 2010. If and stop here. The organization	the organization of qualifies as a pul	did not check a bo blicly supported o	ox on line 13 or 10 rganization	5a, and line 15 is	33-1/3% or more	, check this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-	and-circumstance	s' test, check this	box and stop he	re. Explain in Par	t IV how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and stop he a publicly suppor	re. Explain in Par ted organization	t IV how the ▶
18 RAA	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a			structions

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support							
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants')							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
	The value of services or facilities furnished by a governmental unit to the organization without charge							
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons.							
t	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)				, ,			
Sec	tion B. Total Support	r		r	· · · · · · · · · · · · · · · · · · ·			
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(f) Total
	Amounts from line 6							
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b			<u> </u>				
	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 trs 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 organization, check this box and	is for the organization	ation's first, seco	nd, third, fourth, c	or fifth tax year as	a section 5	01(c)(3) <u> </u>
Sec	tion C. Computation of Pu		ercentage			***		<u> </u>
	Public support percentage for 20			ne 13, column (f))	,	15	
	Public support percentage from	• •	• • •	, (,,,	,		16	<u>.</u>
	tion D. Computation of Inv						<u> </u>	<u>_</u>
	Investment income percentage f				ımn (f))		17	· P
18	Investment income percentage f	rom 2010 Schedu	le A, Part III, line	17	***		18	ુ
	33-1/3% support tests — 2011. It is not more than 33-1/3%, check	f the organization	did not check the	box on line 14. a	and line 15 is mor as a publicly supp	e than 33-1/ orted organ	/3%, ar ization	nd line 17 ►
b	33-1/3% support tests – 2010. If line 18 is not more than 33-1/3%	f the organization	did not check a b	ox on line 14 or f	ine 19a, and line	16 is more t	than 33	i-1/3%, and ►
20	Private foundation. If the organi	zation did not che	ck a box on line	14, 19a, or 19b, o	check this box and	see instruc	tions	▶ □

Schedule .	A (Form 990 or 990-EZ) 2011	OneAmerica		20-0384893	Page 4
Part IV	Supplemental Informate Part II, line 17a or 17b; (See instructions).	tion. Complete this part t and Part III, line 12. Als	o provide the explanations roo complete this part for any	equired by Part II, line additional information	: 10;
-					-
-				·	
					-
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				· – – – – – – – – – – – –	
		- 		. 	

011	Schedule	A, Part	IV - S	Supple	me	ntal Infor	natior	1	Pa	ıge
				America					20-03	
	· · · · · · · · · · · · · · · · · · ·								•	
Part II, Line 10 - Oth	er Income									
Nature and Source	<u>:e</u>	2011	2	2010		2009	2008		2007	
Other	motol č	324. 324.	 	667. 667.	.	3,853. 3,853. \$				_
	Total \$	324.	\$	007.	<u>\$</u>	3,853. \$		0. \$		0.

•

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

OMB No 1545 0047

2011

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2011

, , ,	ction 501(c)(3)) organizations. Complete Pa	arts I-A and C below	Do not complete Part I-	В
Section 527 organizations. Co				
=	s,' to Form 990, Part IV, line 4, or Form 990			
	ns that have filed Form 5768 (election unde	* * * * * * * * * * * * * * * * * * * *	•	•
Part II-A	ns that have NOT filed Form 5768 (election		,	'
	s,' to Form 990, Part IV, line 5 (Proxy Tax) o	or Form 990-EZ, Part	V, line 35a (Proxy Tax),	then
	organizations Complete Part III		···	
Name of organization			Employer identifica	
OneAmerica		F01/-\ i	20-038489	
	organization is exempt under secti			zation.
·	organization's direct and indirect political of	campaign activities in		
2 Political expenditures			▶\$	
3 Volunteer hours	rganization is exempt under secti	on E01/a)/2)		
	cise tax incurred by the organization under		▶ \$	
•	cise tax incurred by the organization under cise tax incurred by organization managers		- \$ ►\$	<u>0.</u>
•	a section 4955 tax, did it file Form 4720 for		- 5	Yes No
4a Was a correction made?	a section 4933 tax, did it life Form 4/20 for	uns year		Yes No
b If 'Yes,' describe in Part IV				☐ ies ☐ ivo
	organization is exempt under secti	on 501(c) excen	t section 501(cV3)	
	xpended by the filing organization for section			
2 Enter the amount of the filir function activities	ng organization's funds contributed to other	organizations for sec	tion 527 exempt	
3 Total exempt function exper line 17b	nditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	► \$	
4 Did the filing organization fi	le Form 1120-POL for this year?		·	Yes No
organization made payment amount of political contribut	s and employer identification number (EIN) is For each organization listed, enter the a tions received that were promptly and direct al action committee (PAC). If additional spirit	mount paid from the t	filing organization's fundarate political organizati	ds Also enter the
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the section 501(h)	ne organization	is exempt under sec	tion 501(c)(3) and 1	iled Form 5768 (ele	
	``	gs to an affiliated group (a	and list in Part IV each	affiliated group member	's name
	-	share of excess lobbying e		annacca group member	3 name,
		ked box A and 'limited con	,		
(The term 'e	Limits on Lobbyir xpenditures' mean	ig Expenditures s amounts paid or incurre	d.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditure	es to influence pub	lic opinion (grass roots lob	bying)	4,556.	
b Total lobbying expenditure	es to influence a le	gislative body (direct lobby	ring)	24,878.	
c Total lobbying expenditure	es (add lines 1a an		29,434.	0.	
d Other exempt purpose ex	penditures		_	2,088,585.	
e Total exempt purpose exp	penditures (add line	s 1c and 1d)	_	2,118,019.	0.
f Lobbying nontaxable amo both columns	ount Enter the amo	unt from the following tabl	e ın	255,901.	
If the amount on line 1e, colum	nn (a) or (b) is Th	ne lobbying nontaxable an	nount is		
Not over \$500,000	2	0% of the amount on line 1e			
Over \$500,000 but not over \$1,00	'	100,000 plus 15% of the excess o	· · · · · · · · · · · · · · · · · · ·		
Over \$1,000,000 but not over \$1,	500,000 \$	175,000 plus 10% of the excess o	ver \$1,000,000.		
Over \$1,500,000 but not over \$17	· · ·	225,000 plus 5% of the excess ov	er \$1,500,000.		
Over \$17,000,000		1,000,000			
g Grassroots nontaxable an	•	<u>-</u>	<u></u>	63,975.	0.
•	h Subtract line 1g from line 1a If zero or less, enter -0-				
i Subtract line 1f from line	Ic. If zero or less,	enter -U-	L	0.	0.
j If there is an amount othe section 4911 tax for this y	er than zero on eith	er line 1h or line 1i, did the	e organization file Form	4720 reporting	∏Yes ∏No
Section 4511 tax for this y		Year Averaging Period Ur	der Section 501(h)		IesNo
(Some	organizations that	made a section 501(h) election below. See the instruction	ction do not have to co	mplete all of the five 2f.)	
	Lobby	ing Expenditures During 4	L-Year Averaging Perio	d	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount	169,280	. 207,038.	244,246.	255,901.	876,465.
b Lobbying ceiling amount (150% of line 2a, column (e))					1,314,698.
c Total lobbying expenditures	16,606	. 5,976.	52,475.	29,434.	104,491.
d Grassroots nontaxable amount	42,320	. 51,760.	61,062.	63,975.	219,117.
e Grassroots ceiling amount (150% of line 2d, column (e))					328,676.
f Grassroots lobbying expenditures	7,606	1,476.	715.	4,556.	14,353.
BAA				Schedule C (Form	990 or 990-EZ) 2011

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NO		-038 i For i		Page
(election under section 501(h)).	1 .			
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	(t	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.				
a Volunteers?b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?				
i Total. Add lines 1c through 1i	\vdash			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If 'Yes,' enter the amount of any tax incurred under section 4912	\vdash			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		ľ		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or		
			·	Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	100 110
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' O answered 'Yes.'	(c)(5) R (b)	, or s Part	ection III-A, line	3, is
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		•
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	ss tical	4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Pa Also, complete this part for any additional information	art II-A	; and I	Part II-B, Iır	ne 1
	<u>.</u>			
		-		

Schedule C (F	orm 990 or 990-EZ) 2011 UneAmerica	20-0384893	Page 4
Part IV	Supplemental Information (continued)		
			
		·	_

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

_						
	eAmerica		C' 11 - F - 1		20-0384893	
Pa	rt I Organizations Maintaining Dono the organization answered 'Yes'	to Form 990. Part IV. Jun	ier Similar Funds ie 6	s or Acc	ounts. Complet	e if
	the organization answered Tes	(a) Donor advised	1	/L\ C	unds and other acc	
1	Total number at and of year	(a) Donor advised	iunus	(b) F	unus and other acc	counts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)				· · · · · · · · · · · · · · · · · · ·	
4	Aggregate value at end of year					
5	Did the organization inform all donors and do funds are the organization's property, subject	onor advisors in writing that th t to the organization's exclusiv	e assets held in dono re legal control?	or advised	Yes	No
6	Did the organization inform all grantees, done used only for charitable purposes and not for purpose conferring impermissible private ben	the benefit of the donor or do	ting that grant funds onor advisor, or for a	can be ny other	∏Yes	No
Pa	rt II Conservation Easements. Comp		newored 'Vec' to	Form 0		ـــا
	Purpose(s) of conservation easements held b			T OIIII 3	50, Fart IV, IIIIe	. / .
•	— · · · ·	, ,	— · · · · ·	an hintoria	ally management land	
	Preservation of land for public use (e.g.,	recreation or education)	_		ally important land	area
	Protection of natural habitat		Preservation of a	a certified	historic structure	
2	Preservation of open space			- 4		
2	Complete lines 2a through 2d if the organizat last day of the tax year	tion held a qualified conservat	ion contribution in th	e form of a	a conservation easi	ement on the
	,				leid at the End of t	he Tax Year
	a Total number of conservation easements			2a		
-	b Total acreage restricted by conservation ease	ements.		2b		
	c Number of conservation easements on a cert		d in (a)	2c	,	
	d Number of conservation easements included		• •			
	structure listed in the National Register	.,		2d		
3	Number of conservation easements modified, tax year ►	, transferred, released, exting	uished, or terminated	l by the or	ganization during th	he
4	Number of states where property subject to c	conservation easement is locate	ted >			
5	Does the organization have a written policy reand enforcement of the conservation easeme	egarding the periodic monitori ents it holds?	ng, inspection, handl	ling of viol	ations, Yes	No No
6	Staff and volunteer hours devoted to monitori	ing, inspecting, and enforcing	conservation easem	ents durin	g the year	_
7	Amount of expenses incurred in monitoring, i	inspecting, and enforcing cons	servation easements	during the	e year	
8	Does each conservation easement reported of 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the i	equirements of secti	on	∏Yes	□No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote	ts conservation easements in its	revenue and expense	statement	, and balance sheet, organization's acc	and
	conservation easements.				•	
Par	Complete if the organization ans	swered 'Yes' to Form 990	I Treasures, or O), Part IV, line 8.	ther Sin	nilar Assets.	
1 a	a If the organization elected, as permitted unde art, historical treasures, or other similar asse in Part XIV, the text of the footnote to its fina	ts held for public exhibition, e	ducation, or research	e stateme n in further	nt and balance she rance of public serv	et works of rice, provide,
ı	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:	er SFAS 116 (ASC 958), to repeled for public exhibition, educate	oort in its revenue station, or research in f	atement a furtherance	nd balance sheet w e of public service,	orks of art, provide the
	(i) Revenues included in Form 990, Part VIII	I, line 1			- \$	
	(ii) Assets included in Form 990, Part X				►\$	
2	If the organization received or held works of a amounts required to be reported under SFAS	art, historical treasures, or oth 116 (ASC 958) relating to the	er sımılar assets for ese items:	financial o	gain, provide the fo	llowing
á	a Revenues included in Form 990, Part VIII, line	e 1			►\$	
1	Assets included in Form 990. Part X				►S	

Schedule D (Form 990) 2011 OneAm				20-038			Page 2
Part III Organizations Maintai							
 Using the organization's acquisition (check all that apply). 	on, accession, and o			g that are a significant u	ise of its	collec	tion
a Public exhibition		d Loan o	r exchange programs				
b Scholarly research		e 🔲 Other					
c Preservation for future gener	ations						
Provide a description of the organ Part XIV		·		,	se in		
5 During the year, did the organizar assets to be sold to raise funds r	ather than to be maii	ntained as part o	f the organization's co	llection?	Yes		No
Part IV Escrow and Custodial line 9, or reported an a	Arrangements. amount on Form	Complete if the 1990, Part X, I	ne organization an ine 21.	swered 'Yes' to For	m 990	, Part	īV,
1a Is the organization an agent, trus included on Form 990, Part X?	itee, custodian, or ot	her intermediary	for contributions or otl	ner assets not	Yes		No
b If 'Yes,' explain the arrangement	in Part XIV and com	plete the following	ng table				
					Amoun	t	
c Beginning balance				1c			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1f			
2a Did the organization include an a	mount on Form 990,	Part X, line 21?			Yes		No
b If 'Yes,' explain the arrangement	in Part XIV					_	
Part V Endowment Funds. Co	mplete if the org	anızatıon ans	wered 'Yes' to For	m 990, Part IV, line	10.		
	(a) Current year	(b) Prior year	(c) Two years bac	k (d) Three years back	(e)	our year	s back
1 a Beginning of year balance					1		
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs	·				1		
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage	e of the current year	end balance (line	e 1g, column (a)) held	as:	•		
a Board designated or guasi-endov	vment ►	8					
b Permanent endowment ►	- }						
c Temporarily restricted endowmer	nt ►	8					
The percentages in lines 2a, 2b,	and 2c should equal	100%.					
3a Are there endowment funds not i	n the possession of	the organization	that are held and adm	inistered for the	نو	· · · · · · · · · · · · · · · · · · ·	
organization by	The production of	o. ga <u>.</u>				Yes	No
(i) unrelated organizations.					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(ii), are the related of	organizations listed a	s required on Sc	hedule R?		3b		
4 Describe in Part XIV the intended	d uses of the organiz	ation's endowme	ent funds.				
Part VI Land, Buildings, and I	Equipment. See	Form 990, Pa	rt X, line 10.				
Description of property		t or other basis evestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) l	Book va	alue
1a Land							
b Buildings							
c Leasehold improvements			5,186.	256.		4	,930.
d Equipment			146,564.	81,921.		64	,643.
e Other							
Total Add lines 1a through 1e (Colum	nn (d) must equal Fo	rm 990. Part X /	column (B), line 10(c)) >		69	.573.

BAA

Part VII	Investments - Other Securities. See	Form 990, Part X,	line 12. N/A	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	tion ket value
(1) Financi	al derivatives			
(2) Closely	r-held equity interests			
(3) Other				
<u>(A)</u>				·
<u>(B)</u>				
(C)				
<u>(D)</u>				
<u>E</u>				
<u> </u>				
(G)				
<u></u>				
	mn (b) must equal Form 990 Part X, column (B) line 12.)			
	Investments - Program Related. See	Form 990, Part X.	line 13. N/A	
<u> </u>	(a) Description of investment type	(b) Book value	(c) Method of valua	tion
	(-)	(2, 200 10	Cost or end-of-year mar	ket value
(1)				
(2)				
(3)				
(4)				
(5)	,			
<u>(6)</u>				
<u>(7)</u> (8)				
(9)	· · · · · · · · · · · · · · · · · · ·			
(10)				
	nn (b) must equal Form 990, Part X, column (B) line 13.)			· · · · · ·
	Other Assets. See Form 990, Part X, I	ine 15. N/A		
		scription		(b) Book value
(1)		•		- · · · · · · · · · · · · · · · · · · ·
(2)				
(3)				
(4)		·····		
(5)				
<u>(6)</u>				
(8)				
(9)				
(10)	turn (h) must squal Form 000. Bort V solumn (D) /mo 15)		
Part X	lumn (b) must equal Form 990, Part X, column (b) Description (b) Must equal Form 990, Part X			
I alt A	(a) Description of liability	(b) Book value	· 1	
(1) Feder	ral income taxes	(b) Book Value	 	
(2)	at moone taxes			
(3)				
(4)	·			
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Colum	nn (b) must equal Form 990, Part X, column (B) line 25)	>		
2 FIN 49 (4	ASC 740) Footpote In Part XIV provide the text	of the footpote to the o	reanization's financial statements that	raparta tha

Sche	dule D (Form 990) 2011 OneAmerica 20	0-038	4893	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1,724	,868.
2	Total expenses (Form 990, Part IX, column (A), line 25)	Ī		0,032.
3	Excess or (deficit) for the year Subtract line 2 from line 1	ſ		,164.
4	Net unrealized gains (losses) on investments	ſ		·
5	Donated services and use of facilities	ſ		
6	Investment expenses	1		
7	Prior period adjustments	1		
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	1	-654	,164.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn		
	Total revenue, gains, and other support per audited financial statements	1	1,784	1,072.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12			<u> </u>
а	Net unrealized gains on investments			
	Donated services and use of facilities 2b	1		
c	Recoveries of prior year grants 2c	1		
d	Other (Describe in Part XIV) See Part XIV 2d 59,204	.1		
	Add lines 2a through 2d	2e	59	,204.
	Subtract line 2e from line 1	3		1,868.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			,,,,,,,
	Investment expenses not included on Form 990, Part VIII, line 7b	1 1		
	Other (Describe in Part XIV.)	1 (
	Add lines 4a and 4b	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,724	,868.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu		.,
	Total expenses and losses per audited financial statements	1		3,236.
	Amounts included on line 1 but not on Form 990, Part IX, line 25		· -	
	Donated services and use of facilities 2a	1		
b	Prior year adjustments 2b	1 1		
	Other losses. 2c	1		
d	Other (Describe in Part XIV) See Part XIV 2d 59,204	1		
	Add lines 2a through 2d	2e	50	9,204.
	Subtract line 2e from line 1	3	2,379	0,032.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			,
а	Investment expenses not included on Form 990, Part VIII, line 7b	1 1		
b	Other (Describe in Part XIV)]		
C	Add lines 4a and 4b	4c		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,379	0,032.
Par	t XIV Supplemental Information			
Part	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comple additional information.	e this p	Tb and 25, eart to provide	
		_		
	·	. 		-
	· 	-		
	· 	·		

Schedule D	(Form 990) 2011 OneAmerica Supplemental Information (continued)	20-0384893	Page 5
Part XIV	Supplemental Information (continued)		
			. – – –
			. – – – –
- 		<i>.</i> -	
		-	
- 			
		•	
-			
		-	
			- -
- 			
-			
			

011	Schedule D, Par	t XIV - Supplemental I	nformation	Page
		OneAmerica		20-03848
Schedule D, Par Other Revenue I Special Event	t XII, Line 2d ncluded In F/S But Not Inc s	cluded On Form 990	Total <u>\$</u>	59,204. 59,204.
Schedule D, Par Other Expenses	t XIII, Line 2d And Losses Per Audited I	F/S		
Special Event	s	,	Total \$	59,204. 59,204.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047 2011

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

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service	or 19, or	at the organization of the Attach to Form	ation enter 1 990 or Fo	rea more tr orm 990-EZ	nan \$15,000 on Form 9 ' ► See separate inst	ructions.	Inspection			
Name of the organization						Employer Identific	ation number			
OneAmerica						20-038489	3			
Part I Fundraising	Activities. Completion filers are not rec	lete if the orgai	nization ai lete this pa	nswered 'Y	es' to Form 990, Part I	V, line 17				
					owing activities Check	all that apply				
a Mail solicitation										
· ⊢ ·	mail solicitations	;		f	Solicitation of gove					
c Phone solicita				g	Special fundraising	events				
d In-person soli 2a Did the organizati employees listed	on have a writter	n or oral agreer t VII) or entity	ment with	any individ tion with pr	lual (including officers, rofessional fundraising	directors, trustees or k services?	Yes X No			
b If 'Yes,' list the te compensated at le	n highest paid in east \$5,000 by th	dividuals or en le organization	tities (fund	draisers) pi	ursuant to agreements	under which the fundra	iser is to be			
(i) Name and addres or entity (fund		(ii) Activity		fundraiser dy or control	(iv) Gross receipts from activity	(v) Amount paid to (or retained by)	(vi) Amount paid to (or retained by)			
or orang (rans	,			ibutions?		fundraiser listed in column (i)	organization			
			Yes	No		GOIGHT (4)				
1										
2	•									
3										
4										
5										
6										
7	· · -									
8										
9			-							
10										
Total		<u>I.</u> ,,	<u> </u>	.			0.			
	which the organiz	ation is registe	red or lice	ensed to so	licit contributions or ha	is been notified it is ex-				
				- -						
		-								
										
				. 						
					. _					
		 -	-			_				
		_ 								

Sch	edule	G (Form 990 or 990-EZ) 2011 OneAmer	ica		20-038	34893 Page 2				
		Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts gro	the organization ar	nswered 'Yes' to Fo s and gross income	rm 990, Part IV, Iır on Form 990-EZ,	ne 18, or reported				
R E			(a) Event #1 Annual Dinner (event type)	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))				
REVENUE	1	Gross receipts	177,417.			177,417.				
Ē	2	Less Charitable contributions.	151,017.			151,017.				
	3	Gross income (line 1 minus line 2)	26,400.			26,400.				
	l _	Cash prizes.								
DIRECT	5 6	Noncash prizes Rent/facility costs	548.			548.				
Č	7	Food and beverages	50,411.			50,411.				
E X P	8	Entertainment	Entertainment 3,350.							
EXPENSES	9	Other direct expenses		2,274.						
10 Direct expense summary Add lines 4 through 9 in column (d). 11 Net income summary Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reposition on Form 990-EZ, line 6a.										
REVENUE		<u> </u>	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))				
Ë	1	Gross revenue								
Ε	2	Cash prizes.								
DIRECT	3	Non-cash prizes								
Č Š T E S	4	Rent/facility costs								
	5	Other direct expenses								
	6	Volunteer labor	Yes %	Yes%	Yes%					
	7	Direct expense summary Add lines 2 thr	ough 5 in column (d)		•					
	8	Net gaming income summary. Combine I	ines 1, column (d) and	line 7	•					
	ls th	er the state(s) in which the organization of ne organization licensed to operate gaming lo,' explain.	activities in each of th	ese states?		Yes No				
10:	 Wer	e any of the organization's naming license	s revoked suspended	or terminated during the		Yes No				

b If 'Yes,' explain

Sche	edule G (Form 990 or 990-EZ) 2011 OneAmerica	20-0384893	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity fadminister charitable gaming?	formed to Yes	No
13	Indicate the percentage of gaming activity operated in:	1 1	
	a The organization's facility	13a	ક્ર
	o An outside facility	13b	
	Enter the name and address of the person who prepares the organization's gaming/special events books a	nd records:	
	Name •	. – – – – –	
	Address >		
15 a	a Does the organization have a contact with a third party from whom the organization receives gaming reven	ue? Yes	□No
	of Yes,' enter the amount of gaming revenue received by the organization > \$ and		
	of gaming revenue retained by the third party • \$		
•	olf 'Yes,' enter name and address of the third party.		
	Name •		
	Address ►		i
16	Gaming manager information		
	Name •	·	
	Gaming manager compensation ► \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to r state gaming license?	∐ Yes	No
t	Enter the amount of distributions required under state law to be distributed to other exempt organizations of	or spent in the	
Da	organization's own exempt activities during the tax year > \$ **TIV Supplemental Information. Complete this part to provide the explanations require	nd by Part L line	2h
<u> Fai</u>	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appleting the part to provide any additional information (see instructions).	icable. Also com	plete
		·	

20-0384893

OMB No. 1545-0047	2011	Open to Public Inspection	Employer identification number	4893	
Cranto Attachion Actions Action Actio	Governments, and Individuals in the United States	Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22. ➤ Attatch to Form 990.	Employer id	20-0384893	General Information on Grants and Assistance
SCHEDIN F.	(Form 990)	Department of the Treasury Internal Revenue Service	Name of the organization	OneAmerica	Part General

	_	•	(h) Purpose of grant or assistance	WA New	Americans	Program-State	WA New	Americans	Program-State	WA New	Americans	Program-State	WA New	Americans	Program-State	English	Innovations	Program-Gates	ייייייייייייייייייייייייייייייייייייייי	English	Transmitter	TIMONALIONS	Program-Gates	WA New	Americans	Program-State	13		Schedule I (Form 990) (2011
	tion answered '\ ceived more thai		(g) Description of non-cash assistance																								:		Schedu
rt IV	te if the organiza one recipient rec		(f) Method of valuation (book, FMV, appraisal, other)																										06/01/11
Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. See Part IV	ed States. Comple heck this box if no		(e) Amount of non-cash assistance		,	0.			0.			0.			0.			0.	c	0			0			0.			TEEA3901L 06/01/11
ant funds in the United	nts and Organizations in the United States. Complete if the organization answered 'Yes' to that received more than \$5,000. Check this box if no one recipient received more than \$5,000.		(d) Amount of cash grant			26, 516.			8, 591.			25, 538.			18,172.			16,364.	000	20,000.			5,260			27, 155.	n the line 1 table .		
intoring the use of gr	ents and Organi t that received m	e is needed	(c) IRC section if applicable			501(c)(3)			501 (c) (3)			501 (c) (3)			501 (c) (3)			501 (c) (3)	501(0)(3)				3 501 (c) (3)			501 (c) (3)	rganizations listed II	1 table.	ıs for Form 990.
procedures for mon	nce to Governm for any recipient	additional space	(b) EIN			91-0916176			91-1585652			23-7438529			93-0386860			91-1522175	5001131-15	7661101-16			91-0567738			91-0570872	3) and government c	ions listed in the line	, see the Instruction
Ō	Part II Grants and Other Assistance to Governmer Form 990, Part IV, line 21 for any recipient	Part II can be duplicated if additional space	1 (a) Name and address of organization or government	(1) ACRS	MLK Jr Way S	Seattle, WA 98144	(2) CCS Family Immigration	<u>PO_Box_2909</u>	VA 98273	(3) Chinese Inform/Svcs Ct	<u>611_S_Lane_St</u>	.04	(4) Lutheran Comm. Svcs.		Portland, OR 97214	(5) Renton Technical College	3000 NE Fourth St.	Renton, WA 98056	(6) Somali Comm. Svcs	O Ct Tames Cathodral	17. 27		Seattle, WA 98104	(8) Tacoma Community House	1314 S. L St		2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3 Enter total number of other organizations listed in the line	BAA For Paperwork Reduction Act Notice, see the Instructions

Schedule I (Form 990) (2011)

20-0384893 OneAmerica Schedule 1 (Form 990) (2011)

Page 2

Schedule I (Form 990) (2011) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (f) Description of non-cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) Grantees for Washington New Americans send in monthly reports of program activities year. Grantees receive site visits several times during the grant year as well as to the program manager as well as submit a summary report at the end of the grant (d) Amount of non-cash assistance participate in trainings and Citizenship Day activities. Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part III BAA m ស 9 7

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047 2011

Department of the Treasury Internal Revenue Service Name of the organization

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

<u>OneAmerica</u> 20-0384893
Form 990, Part III, Line 2 - New Services
1. Gates Education Grant for CCER/Roadmap for Education Results research regarding
ELL students in public schools.
2. English Innovations Pilot program for adult ESL students in technology-based
classes.
Form 990, Part III, Line 4a - Program Service Accomplishments
Community Organizing and Civic Engagement:
OneAmerica works to build power in diverse ethnic communities in collaboration with
key allies. We do this through identification of and action on key issues that affect
immigrants. We bring immigrants together with the mainstream public and provide
opportunities to work for the common good and effect systemic change. Our 2011
priority issue areas included immigrant integration, racial profiling, and civil and
human rights generally. We also educate, mobilize and engage immigrants, identify
strong leaders, and develop their skills and abilities in order to help immigrants
better_understand_and_participate_in_the_democratic_process
In 2011, our major accomplishments in this area included substantial work on
immigrant_integration: along with the National Partnership for New Americans,
OneAmerica co-hosted the National Immigrant Integration Conference, an annual event
for more than 600 experts from across the U.S. We also worked to ensure East African
immigrants in South King County had adequate access to exercise facilities through
county funding. Our Washington New Americans program, a partnership with the American
Immigration Lawyers Association, provided citizenship services for eligible legal
permanent residents through state and private funding. We continued our organizing
work with community base groups in eleven locations across the state of Washington,
helping immigrants to identify issues of interest to them and then working to educate
and build leadership in immigrant communities. Our Immigrants Day at the Capitol in

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Schedule 0 (Form 990 or 990-EZ) 2011	Page 2
Name of the organization	Employer identification number 20-0384893
OneAmerica	/ / / / / / / / / / / / / / / / / / / /
Form 990, Part III, Line 4a - Program Service Accomplishments	
early 2011 engaged over 400 immigrants in our democratic proce	ss by enabling
immigrants to meet with their legislators.	
Form 990, Part III, Line 4b - Program Service Accomplishments	
Policy, Research and Communications:	
In 2011, OneAmerica worked to ensure broad access to accurate	information and deeper
understanding of issues through educating policymakers and oth	ers about issues
affecting immigrants and refugees. In 2011 we developed a focu	s on immigrant
students and English language learners (ELLs), conducting rese	earch on the status of
ELL students in Washington's public schools through the Road M	ap for Education
Results project. We also provided English instruction in techn	ology-based classes
through our new pilot program, English Innovations. OneAmerica	continued to lead the
Washington Immigrant Rights Coalition, with over 80 groups as	partners. We also
served in leadership roles on national coalitions, including t	he National
Partnership for New Americans, the Rights Working Group and th	e Fair Immigration
Reform Movement of the Center for Community Change. Through ou	r website we provided
fact sheets based on substantiated research, and supplied poli	cymakers and reporters
with information on key issues. In all of our work, we use com	munications tools in
English and other languages, including social media and tradit	ional media outlets,
to reach immigrant communities and to inform the public.	
Form 990, Part VI, Line 8 - Explanation of No Contemporaneously Documentation	of Meetings
Actions must be voted on by the entire Board, no committee sav	e the Executive
Committee has authority to act on behalf of the Board and even	then the Board is
immediately notified of the action taken, so advisory committe	es do not necessarily

keep minutes.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees

in the ED's permanent personnel file.

There are no other compensated officers or key employees as defined by the IRS, but if there were, the same policy would be adhered to as noted above for the Executive

the Board to the Finance Manager for processing and a copy of the letter is placed

Schedule O (Form 990 or 990-EZ) 2011	Page 2
Name of the organization	Employer identification number
OneAmerica	20-0384893
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Office	ers & Key Employees (continued)
Director.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Upon request.	
	
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