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Department of the Treasury

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)

MB No 1545-0047 2011 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection For the 2011 calendar year, or tax year beginning and ending C Name of organization Employer identification number Address change WASHINGTON PROGRESS ALLIANCE 20-4258530 Doing Business As Name change Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return 201 206-324-2741 1402 THIRD AVENUE Terminated City or town, state or country, and ZIP + 4 SEATTLE 98101 387,751 Amended return G Gross receipts \$ Name and address of principal officer Application nending X No H(a) Is this a group return for affiliates: SARAH JAYNES 1402 THIRD AVENUE Yes Are all affiliates included? 98101 If "No," attach a list (see instructions) SEATTLE **4**) **◀** (insert no) X 501(c) (4947(aV1) or 527 501(c)(3) WWW.WASHINGTONPROGRESS.ORG Group exemption number X Corporation Trust Association 2006 WA M State of legal domicile Year of formation Summary 1 Bnefly describe the organization's mission or most significant activities WASHINGTON PROGRESS ALLIANCE IS A GROUP OF ENTREPRENEURIAL DONORS WHO HAVE Governance TEAMED UP TO MAKE INTERCONNECTED, HANDS-ON INVESTMENTS IN THE FOUNDATION OF SOCIAL AND POLITICAL CHANGE IN THE STATE. 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets 10 3 Number of voting members of the governing body (Part VI, line 1a) ø 10 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities 5 2 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 0 6 6 Total number of volunteers (estimate if necessary) 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 Pnor Year Current Year RECEIVED 348,571 295,633 8 Contributions and grants (Part VIII, line 1h) 0 33,000 9 Program service revenue (Part VIII, line 2g) Ø 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d A D Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Ŏ W -49 90 AUG 1 0 2012 0 O 295,584 381,661 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column.(A) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) OGDEN 212,475 227,000 14 Benefits paid to or for members (Part IX, column (A), line 4) 54,250 70,179 15 Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 12,198 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 16,615 27,249 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 297,865 309,903 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -2,281 71,758 19 Revenue less expenses Subtract line 18 from line 12 End of Year Beginning of Current Year 5 199,435 130,819 20 Total assets (Part X, line 16) 4,549 1,407 21 Total liabilities (Part X, line 26) 198,028 126,270 22 Net assets or fund balances Subtract line 21 from line 20 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 Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge true, correct, and complete Sign 06/26/2012 BOARD SECRETAR Here Type or prnt name and title Date Pnnt/Type preparer's name Check

SCANNED AUG

Paid

Preparer

Use Only

EJ KIM

Firm's name

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

SEATTLE, WA

EJK ACCOUNTING AND TAX SERVICES

98109\6202

1607 DEXTER AVE N STE 1B

P01063576

06/26/12

Firm's EIN

Phone no

Yes | No Form **990** (2011)

Form 990 (2011) Y	ASHINGTON	PROGRESS ALLIANO	E_	20-4258530		Page 2
Part III Sta	tement of Progr	ram Service Accomplishr	nents			
		contains a response to a	ny question in th	nis Part III		$\Box \Box$
WASHINGTO TEAMED U	P TO MAKE	ALLIANCE IS A	HANDS-ON :		AL DONORS WHO HA N THE FOUNDATION	
pnor Form 990		significant program services during s on Schedule O	the year which we	re not listed on the	Yes	X No
services?	zation cease conduction be these changes on	ng, or make significant changes in	n how it conducts, a	ny program	Yes	X No
4 Describe the o expenses Sec	rganization's program tion 501(c)(3) and 50	service accomplishments for each 1(c)(4) organizations and section total expenses, and revenue, if an	4947(a)(1) trusts are	e required to report the am		
- FUSE W. COMMUNICATO INFLUI - WASHING - WIN/WII TOGETHER STRONGER - PROGRES	ATE WITH AN ENCE ELECTORY BUS - N ACTION, TO ACHIEVE BASE SSIVE MAJOR	AN ONLINE ADVOC N ACTIVE BASE OF ORAL AND POLICY	ACY ORGAN: TENS OF ' MATTERS S MOVEMENT CONSTITUENT ND ECONOMI	THOUSANDS OF TOF YOUNG PE TOSASED ORGAN TES OF SCALE TRAINING TO	NG TO BUILD AND ONLINE SUPPORTER OPLE IN POLITICS IZATIONS ACTING AND TO BUILD A	
GROUP OF FOUNDATIO TECHNOLOG ALLIANCE SPACE, A	DONORS TO ON OF THE SY TOOLS, I ACTS AS A	RESEARCH, AND OR N INCUBATOR FOR ECHNICAL, ORGANI	ECRUITED, S AND MAKI MENT IN W GANIZING S NEW PROGRA	DEVELOPED, A E GRANTS INTO ASHINGTON STA STRATEGIES. T AMS AND ORGAN	BUILDING THE TE THROUGH SHARE HE PROGRESS IZATIONS IN ITS	D
4c (Code) (Expenses \$	ındud	ing grants of \$)	(Revenue \$	•
4d Other program	services (Describe i	n Schedule O)				
(Expenses \$, 	including grants of \$) (Revenue \$		
	service expenses					
	<u>.</u>					

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 (see instructions)?
- 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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II
- 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 98-19? If "Yes," complete Schedule C, Part III
- 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
- 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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII. IX. or X as applicable
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. Part VI
 - 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
 - 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
 - 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
 - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - 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
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII
 - 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
- 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, 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
- 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
- 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
- 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)
- 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
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
- b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
		v
1 2	х	<u> </u>
-2		
3		x
4		
5		x
6		<u>x</u>
7		X
8		x
9		X
10		X
	-	
11a	x	
11b		x
11c		x
11d		<u>x</u>
11e		X
11f		х
12a		х
12b		_x_
13		X
14a		X
14b		X
15	<u> </u>	x
16		x
17		x
18		х
19		x
20a		X
20b		
Fo	m 99	0 (2011)

Part IV Checklist of Required Schedules (continued)

	Officerist of Required ochedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		res	NU
	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? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	1		
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrew account other than a refunding escrew 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	<u> </u>		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	1.3.3.		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
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		1	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<u> </u>	t	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
_	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
Ū	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		t	
••	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,			
٠.	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<u> </u>		
V	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>	1	
•••	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	1	 	
•	IV, and V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	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		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable	335	1	<u> </u>
55	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
Ų,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	37	<u> </u>	 -
55	19? Note . All Form 990 filers are required to complete Schedule O	38	x	
_	19. 1906. 78 FORTH 990 IIIGIS die required to complete contecute o		m 99	n (2044)

	990 (2011) WASHINGTON PROGRESS ALLIANCE 20-425853	0		P	age 5
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance	· · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response to any question in this Part V				Π
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	2	:		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	x	
	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	1	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial				
	account)?		4a		X
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 Account	3	:		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a					
	organization solicit any contributions that were not tax deductible?		6a	x	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
_	gifts were not tax deductible?		6Ь	х	
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods				
-	and services provided to the payor?		7a	ı	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		-15		
·	required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	. [''		
		'	7e		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7f		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	no rogumd?			
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 at the organization received a contribution of case boots symlanes or other vehicles did the organization file.	·	7g		
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	FORT 1096-07	7h		
0	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		.		
0	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a		
b 40	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter	_ 1			
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 dub facilities	0			
11	Section 501(c)(12) organizations. Enter	_ 1			
a	Gross income from members or shareholders	a		,	
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them)	<u> </u>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 1	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а			13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	1	1			
	the organization is licensed to issue qualified health plans				
С	Enter the amount of reserves on hand	c	<u> </u>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		<u> </u>
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		
DAA			E	uar	1 0011

Form 990 (2011) WASHINGTON PROGRESS ALLIANCE 20-4258530

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 Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 10 1a Enter the number of voting members of the governing body at the end of the tax year If 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 10 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a a The governing body? X 8h **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X 9 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c describe in Schedule O how this was done 13 13 Did the organization have a written whistleblower policy? 14 14 Did the organization have a written document retention and destruction policy? 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? X a The organization's CEO, Executive Director, or top management official 15a X 15b **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? b If "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 take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Own website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the 1402 THIRD AVENUE SARAH JAYNES organization >

206-324-2741

WA 98101

SEATTLE

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Form 990 (2011)	WASHINGTON	PROCRESS	AT.T.TANCE

20-4258530

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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 nor any related organizations compensated any current officer, directors or function.

Check this box if neither the organ		relate T	d org			is cor	npe				
(A) Name and Title	(B) Average hours per week (describe hours for	bo	x, unle ficer a	Pos check ess pe	more	than on s both a trustee	an)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Kay employee	Highest compensated employee	Former	(W-2/1099-MISC)	(VF-2) TUSS-MISC)	rrom the organization and related organizations	
(1) VALERIE TARICO	-	 							<u></u>		
PRESIDENT	1.00	X	_	X		Ш		0	0	0	
(2) BRETT BURRIS											
VP AND TREASURER	1.00	X		X		Ш		0	0	0	
(3) PAUL ABRAMS											
BOARD MEMBER	1.00	X				\sqcup		0	0	0	
(4) BRIAN ARBOGAST										_	
BOARD MEMBER	1.00	X				\vdash		0	0	0	
(5) JABE BLUMENTHAL	4 00	l								_	
BOARD MEMBER	1.00	X	_	_		\vdash		0	0	0	
(6) DAVID GIULIANI BOARD MEMBER	1 00	3,5								•	
(7) DAVID KAPLAN	1.00	X		\vdash		Н		0	0	0	
BOARD MEMBER	1.00	x				Ιİ		o	o	0	
(8) ELISE LUFKIN	1.00		\vdash	<u> </u>		\vdash					
BOARD MEMBER	1.00	x						o	0	0	
(9) BILL POPE	1.00					\vdash			0		
BOARD MEMBER	1.00	x						o	o	0	
(10) RUTH LIPSCOMB		╁	 								
SECRETARY	1.00	x	l .	x				0	0	0	
(11) SARAH JAYNES	<u> </u>	<u> </u>		<u> </u>							
EXECUTIVE DIRECTOR	18.00			x				37,437	47,563	3,497	
(12)									,		
(13)								MIN	<u> </u>		
(14)	<u>.</u>										

<u>Pa</u>		, Directors, Trus	itees								
	(A) Name and title	(B) Average hours per week (describe	(C) Poston (do not check more than one box, unless person is both ar officer and a director/trustee)					ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)											
(16)											
(17)											
(18)						<u> </u>					
(19)											· .
(20)											
(21)											
(22)											
(23)									, , , , , , , , , , , , , , , , , , ,		
(24)	*										
(25)											
1b c	Sub-total Total from continuation shee	ets to Part VII. S	ectio	n A				▶	37,437	47,563	3,497
d 	Total (add lines 1b and 1c) Total number of individuals (inc	duding but not lim	utad t	o the	see lie	etad	abov	(a)	37,437	47,563	3,497
_	reportable compensation from t	-		0)3C II	SICU	allov		nio received more than \$100	0,000 111	1 1
3	Did the organization list any for	•				•		loye	e, or highest compensated		Yes No
4	employee on line 1a? If "Yes," For any individual listed on line	1a, is the sum of	f repo	ortabl	le cor	mpe	nsatio			the	3 X
5	organization and related organi individual	•		·			·		•	adual	4 X
	Did any person listed on line 1: for services rendered to the or	ganization? If "Yes								nduai 	5 X
1	ction B. Independent Contractor Complete this table for your five compensation from the organization	e highest comper									
_		(A) I business address	ipen.	2001		,,,,,,	alon ((B) tion of services	(C) Compensation
		<u> </u>									
											
_											
_	Tabel annahan of redescendents	and the state of the state of			. I	. اد مه			usted above) u.t		
2 DAA	Total number of independent or received more than \$100,000 c	•	_					/SC	ISIEU AUUVE) WIIU	0	Form 990 (2011)

Part_V		ent of Reve			- ADDIA		20 4230330		Page 3
						(A) Total revenue	(B) Retated or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ម្តីស្គ 1a	Federated cam	paigns	1a						
Contributions, Gifts, Grants and Other Similar Amounts	Membership di	ies	1b						
c B	Fundraising ev	ents	1c						
<u>뚫</u> a	Related organiz	ations	1d]		1
S.E. e	Government grants (contributions)	<u>1e</u>						1
ဦး ရ	All other contributions								
	and similar amounts	not included above	1f		348,571	1			
불일 9	Noncash contributions	unduded in lines 1a-1	f :	\$	2,071				
<u>ပိုန်း h</u>	Total. Add line	s 1a–1f				348,571			
활	•				Busn Code				
₽ 2a	PROGRAM	INCOME				33,000	·		33,000
Program Service Revenue									
.ĕ c									
<u>छ</u> d					<u> </u>	-,			_
[편 e					<u> </u>				
<u>ම</u> ී f		m service reven	ue						
 	Total. Add line					33,000			
3		ome (including d	lividend	s, interest	· _ [Ì
١.	and other simil	-				58	58		-
4		vestment of tax-	exempt	bond pro	ceeds 🚩				
5	Royalties			4.5					+
	0	(i) Real			Personal				
	Gross rents								
i	Less rental exps								
ļ c	• • •								
	Net rental inco Gross amount from	(i) Secunties		6.) Other				-
	sales of assets		,122	(u) Outer				
	other than inventory		, 122						
"	Less cost or other	6	,090		*				
	basis & sales exps Gain or (loss)		32	<u> </u>					
	Net gain or (loss))		l		32	32		
		∞) om fundraising eve	nte			32	<u> </u>		
a "	(not including \$	in fullulaising eve	III.S						
Revenue		eported on line 1c	١						
&	See Part IV, line	•	a l						
Other	Less direct ex		ь						
ັ ັ		(loss) from fund	- 1	events	•				ľ
		m gaming activities							
	See Part IV, line		а						
Ь	Less direct ex		b						
1		(loss) from gami	no activ	/ities	•	ì			
	Gross sales of		,						
	returns and allo	-	а						
Ь	Less cost of g	oods sold	b						
c	Net income or	(loss) from sales	of inve	entory	•				
	Mis	cellaneous Revenue			Busn Code				
11a									
Ь									
c									
ď	All other reven	Je							
e	Total. Add line	s 11a–11d			•				
12	Total revenue	. See instruction	IS			381,661	90		33,000

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 response to	any question in this Part IX	· ·		
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	<u> </u>			•	
	organizations in the U.S. See Part IV, line 21	212,475	212,475		
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				
	US See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	38,977	128,987	1,902	8,088
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 salanes and wages	21,755	16,179	4,514	1,062
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	1,776	1,320 3,513	369	<u>87</u>
9	Other employee benefits	4,724	3,513	980	231
10	Payroll taxes	2,947	2,192	611	144
11	Fees for services (non-employees)				
а	Management	 _			
þ	9				
C	Accounting	5,124		5,124	
d	, , ,	***			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	5 540	F 500		
g		5,542	5,500	42	
12	Advertising and promotion	1 040	4 075	202	
13	Office expenses	1,848	1,375	383	90
14	Information technology				
15	Royalties	6 667	4 050	1 202	206
16	Occupancy	6,667	4,958	1,383	326
17	Travel	2,130	1,596	432	102
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	2,068	162		1 006
19	Conferences, conventions, and meetings	2,068	162		1,906
20	Interest Payments to affiliates				
21		212	·	212	
22 23	Depreciation, depletion, and amortization Insurance	2,240		2,240	
24	Other expenses Itemize expenses not covered	2,240	<u> </u>	2,240	
24	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 ()				
а	SPONSORSHIP	1,025	1,025		
b	FUNDRAISING & OUTREACH	162			162
C	TAXES AND LICENSING	130		130	102
d	BANK FEES	65		65	
e		36	36		-
25	Total functional expenses. Add lines 1 through 24e	309,903	279,318	18,387	12,198
26	Joint costs. Complete this line only if the	300,000		20,007	
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶				
	following SOP 98-2 (ASC 958-720)				
DAA				L	Form 990 (2011)

Pa	ırt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			69,774	1	140,561
	2	Savings and temporary cash investments		[60,198	2	58,239
	3	Pledges and grants receivable, net		[3	
	4	Accounts receivable, net		[4	
	5	Receivables from current and former officers, directors, trus					
		employees, and highest compensated employees. Complete	e Part II of				
		Schedule L	į		5	•	
	6	Receivables from other disqualified persons (as defined unit					
		4958(f)(1)), persons described in section 4958(c)(3)(B), and	d contributing				
		employers and sponsoring organizations of section 501(c)(9					
क		employees' beneficiary organizations (see instructions)				6	
Assets	7	Notes and loans receivable, net				7	
Ÿ	8	Inventones for sale or use		[• · · ·	8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or] [
		other basis Complete Part VI of Schedule D	10a	1,059			
	b	Less accumulated depreciation	10b	424	847	10c	635
	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)			130,819	16	199,435
	17	Accounts payable and accrued expenses			1,010	17	1,407
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of S	chedule D			21	
SS.	22	Payables to current and former officers, directors, trustees,	key				
itie		employees, highest compensated employees, and disqualifi	ied persons				
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelated third pa	arties	Į.	, .	23	
	24	Unsecured notes and loans payable to unrelated third partie	es	į		24	
	25	Other liabilities (including federal income tax, payables to re	elated third				
		parties, and other liabilities not included on lines 17-24) Co	omplete Part X				
		of Schedule D			3,539	25	
	26	Total liabilities. Add lines 17 through 25			4,549	26	1,407
		Organizations that follow SFAS 117, check here ▶ 🗓	and complete				
Ses		lines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets			126,270	27	198,028
Bal	28	Temporanly restricted net assets			28		
пd	29	- ···-·				29	
F		Organizations that do not follow SFAS 117, check here	e ▶ 🔝 and				
S 0		complete lines 30 through 34.					
Net Assets or Fund Balances	30]		30	,	
AS	31	3, 1 4, 1].		31	
Net	32	Retained earnings, endowment, accumulated income, or ot	her funds].		32	
_	33			ļ	126,270	33	198,028
	34	Total liabilities and net assets/fund balances		l	130,819	34	199,435

Form	1 990 (2011) WASHINGTON PROGRESS ALLIANCE 20-4258530			Pa	ge 12
Pa	rt 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)	1		<u>81,0</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		09,9	
3	Revenue less expenses Subtract line 2 from line 1	3		71 , '	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12	<u> 26,2</u>	<u> 270</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
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	19	98,0	<u> 328</u>
Pa	ert XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				\Box
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				l
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in				i
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	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?		2c	. 1	
	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				ĺ
	issued on a separate basis, consolidated basis, or both			.	ĺ
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			For	m 990	(2011)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
 Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 See separate instructions.

2011
Open to Public Inspection

Name of the organization

Employer identification number

W	ASHINGTON PROGRESS ALLIANCE		20-42	258530
Pa	rt I Organizations Maintaining Donor Advised Fund	ds or Other Similar Funds or Ac		
	organization answered "Yes" to Form 990, Part IV			Complete ii iiis
		(a) Donor advised funds	(t) Funds and other accounts
1	Total number at end of year			·
2	Aggregate contributions to (during year)			
3	Aggregate grants from (duning year)	-		
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the	assets held in donor advised		
J	funds are the organization's property, subject to the organization's exclusive			☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in writ			
U	only for charitable purposes and not for the benefit of the donor or donor a	• •		
		dvisor, or for any other purpose		Yes No
- Da	conferring impermissible private benefit? Int II Conservation Easements. Complete if the organ	ization answered "Ves" to Form 00	n Part	
			o, rait	iv, me i.
1	Purpose(s) of conservation easements held by the organization (check all			
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically impor		area
	Protection of natural habitat	Preservation of a certified historic s	suucture	
_	Preservation of open space	on contribution is the form of a contribution in		
2	Complete lines 2a through 2d if the organization held a qualified conservat easement on the last day of the tax year	ion contribution in the form of a conservation	l	
	easement on the last day of the tax year			Hald at the Fad of the Tan Vern
				Held at the End of the Tax Year
a	Total number of conservation easements		2a	····
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure include	` '	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06,	and not on a		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, exting	uished, or terminated by the organization du	inng the	
	tax year ▶			
4	Number of states where property subject to conservation easement is local	ted ▶		
5	Does the organization have a written policy regarding the periodic monitor	ng, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			∐ Yes ∐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	conservation easements during the year		
	>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing con-	servation easements during the year		
	▶ \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of section 170(h)(4)(B)		
	(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservation easements	s in its revenue and expense statement, and	I	
	balance sheet, and include, if applicable, the text of the footnote to the organization	ganization's financial statements that describ	es the	
	organization's accounting for conservation easements			
Pa	rt III Organizations Maintaining Collections of Art, I		milar A	ssets.
	Complete if the organization answered "Yes" to Fo	orm 990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to	o report in its revenue statement and balance	æ sheet	
	works of art, historical treasures, or other similar assets held for public ext	nibition, education, or research in furtherano	e of	
	public service, provide, in Part XIV, the text of the footnote to its financial	statements that describes these items		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to re	port in its revenue statement and balance s	heet	
	works of art, historical treasures, or other similar assets held for public ext	nibition, education, or research in furtherano	e of	
	public service, provide the following amounts relating to these items			
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		•	\$
2	If the organization received or held works of art, historical treasures, or other	ner similar assets for financial gain, provide t	the	
	following amounts required to be reported under SFAS 116 (ASC 958) rel	ating to these items		
а	De la company de		•	\$
	Assets included in Form 990, Part X		•	\$

<u>Sche</u>	Bule D (Form 990) 2011 WASHINGTON	PROGRESS	ALL:	IANCE		20-4258	<u> 530 </u>		Pa	ge 2
Pa	rt III Organizations Maintaining C	Collections of A	Art, His	torical Tre	asures, or	Other Sim	ilar Assets (continue	d) _	
3	Using the organization's acquisition, accession, a collection items (check all that apply)	and other records, cl	heck any	of the following	g that are a s	significant use o	f its			
а	Public exhibition	a□	Loan or e	xchange progr	rams					
b	Scholarly research	_	Other	0,0						
С	Preservation for future generations									
4	Provide a description of the organization's collect	tions and explain ho	w they fu	rther the organ	nızatıon's exer	mpt purpose in	Part			
	XIV	·	•	•						
5	During the year, did the organization solicit or re- assets to be sold to raise funds rather than to be					г		☐ Ye	. □	No
Pa	rt IV Escrow and Custodial Arrar					vered "Yes"	to Form 990			110
	line 9, or reported an amount				zation and	vered 100	10 1 01111 000	, i dit iv,		
1a	Is the organization an agent, trustee, custodian of				er assets not					
14	included on Form 990, Part X?	or other intermediary	ioi com	ibalions or our	ici assets not			☐ Ye	۾ ⊓	No
h	If "Yes," explain the arrangement in Part XIV and	t complete the follow	ana tahle					□	• Ш	
Ü	ii res, explain the alrangement in rait XIV and	complete the follow	ning table					Amount		
	Beginning balance						1c			_
C	• •						1d			
•	Additions during the year						1e			
٤	Distributions during the year						1f			
† 22	Ending balance	000 Part V line 21	2					Ye		No
	Did the organization include an amount on Form	990, Part A, line 21	•					☐ 'e	• ∟	140
	rt V Endowment Funds. Complete	te if the organiz	ation ar	rewared "V	es" to Forn	000 Part	V line 10			
ra	Lildowinient i dilds. Comple	(a) Current year) Pnor year	(c) Two yea) Three years back	(e) Four	years b	ack
10	Beginning of year balance	(2) 02	- ,-	, year	(1)		,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,	
	Contributions									
										
·	Net investment earnings, gains, and losses							,		
								 		
	Grants or scholarships							,		1
е	Other expenditures for facilities and				ļ			1,	, , >	
	programs				 			+	· .	
	Administrative expenses					 		 		
g	End of year balance		4	l (=)\ b = lef	l	<u> </u>				
2	Provide the estimated percentage of the current		ne ₁g, ∞	olumn (a)) nelo	as					
	Board designated or quasi-endowment	%								
	Permanent endowment > %	0/								
С	Temporarily restricted endowment ▶	%								
_	The percentages in lines 2a, 2b, and 2c should	•		5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		. _				
за	Are there endowment funds not in the possession	on of the organization	n that are	neid and adn	ninistered for t	ne		ſ	V	NI-
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations			DO.				3a(ii)		
	If "Yes" to 3a(ii), are the related organizations lis							3b		
	Describe in Part XIV the intended uses of the or				10					
Pa	rt VI Land, Buildings, and Equip					(-) (ulated 1	(d) Dook	ualua.	
	Description of property	(a) Cost or other to (investment)	Dasis	(b) Cost or o	1	(c) Accumi deprecia		(d) Book	Value	
		(misconing(III)		1001	,	depieda				
	Land									
	Buildings									
	Leasehold improvements									
	Equipment									
	Other			(D) les- 40/-1		<u></u>				

Schedule D (F	om 990) 2011 WASHINGTON PROGRESS		20-4258530	Page 3
Part VII	Investments—Other Securities. See Form 99	90, Part X, line 12		
	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)		Cost or end-of-year	r market value
(1) Financial d	denvatives			
(2) Closely-hel	ld equity interests			-
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)			1	
(F)			1	
(G)				
(H)				
(I)			+	
	n (b) must equal Form 990, Part X, col (B) line 12)	>		
Part VIII	Investments—Program Related. See Form 9	·	<u> </u>	
_ rait viii	(a) Description of investment type	(b) Book value	(c) Method of	valuation
	(a) becapeon of investment type	(b) book value	Cost or end-of-year	
(1)			+	
(2)			•	
(3)				
(4)			+	
(5)			+	· · · · · · · · · · · · · · · · · · ·
(6)			-	
(7)				
_(8)				
(9)		_		
(10)				
	(1)	>	<u> </u>	
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description			(b) Book value
(1)				
(2)			1-100-11	
(3)				
(4)				
(5)				
(6)	·			
_(7)				
(8)				
(9)				
(10)				
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. See Form 990, Part X, line 2	25.		
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)		<u> </u>		
(8)			7	
		·	=	
<u>(9)</u>			\dashv	
(10)	180		-	
(11)	#\		-	
	(2) (2) (2)	<u> </u>	1	
2 FIN 48 (AS	C 740) Footpote In Part XIV provide the text of the footpote t	to the omanization's financial s	tatements that renorts the	

Sched	ule D (Fo	m 990) 2011	WASHINGTON	PROGRESS	ALLIANCE		20-4258530		Page 4
Pa	rt XI	Reconcilia	tion of Change in	Net Assets fro	m Form 990 to	Audited F	inancial Stateme	nts	
1	Total reve	nue (Form 990	, Part VIII, column (A), li	ne 12)				1	
2	Total expe	enses (Form 99	90, Part IX, column (A), li	ne 25)				2	
3	Excess or	(defiat) for the	year Subtract line 2 fro	m line 1				3	
4	Net unrea	lized gains (los	ses) on investments					4	
5	Donated :	services and us	e of facilities					5	
6	Investmer	nt expenses						6	
7	Pnor pend	od adjustments					ļ	7	
8	Other (De	escribe in Part X	(IV)					_8_	
9	Total adju	istments (net) /	Add lines 4 through 8					9	
10_	Excess or		year per audited finance					10	
Pa	rt XII		tion of Revenue p			ts With F	Revenue per Retu	ırn	
1		. •	d other support per audit		nts			1	
2	Amounts	included on line	e 1 but not on Form 990,	Part VIII, line 12					
а		ılızed gaıns on ı				2a			
b		services and us				2b			
С		s of pnor year	_			2c			
	•	escribe in Part X	(IV)			2d	·		
е		2a through 2d						2e	
3		ine 2e from line				1 1		3	
4	Amounts	ınduded on For	m 990, Part VIII, line 12	, but not on line 1:					
а		•	included on Form 990,	Part VIII, line 7b		4a			
	•	escribe in Part >	(IV)			4b	·		
С		4a and 4b						4c	
5			3 and 4c. (This must eq					5	
	rt XIII		tion of Expenses		nancial Stateme	nts With	Expenses per Re		
1	•		es per audited financial s					1_	
2			1 but not on Form 990,	Part IX, line 25		1 - 1			
a		services and us	e of facilities			2a			
Þ	•	adjustments				2b			
-	Other loss		20.45			2c			
d	•	escribe in Part >	KIV)			2d			
e		2a through 2d						2e	
3		line 2e from line	-			1 1		3	
4			m 990, Part IX, line 25,			40			
a		•	tincluded on Form 990,	Paπ VIII, IINE /D		4a			
	•	escribe in Part >	NIV)			4b		4-	
_		4a and 4b	o 2 and 40 /This	and Form 000 De-	+ 1 line 40 \			4c	
5 D-			s 3 and 4c. (This must e	quai Form 990, Par	i i, iirie 18)			_ 5	

Part XIV Supplemental Information

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

Schedule D (Form 990) 2011 WASHINGTON PROGRESS ALLIANCE

20-4258530

Page 5

Part XIV Supplemental Information (continued)

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Open to Public 2011

Employer identification number

OMB No 1545-0047

WASHINGTON PROGRESS ALLIANCE	S ALLIANCE				20-42	20-4258530	
Part I General Information on Grants and Assistan	d Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the grants or assistance?	e amount of the gran	is or assista	nce, the grantees' eligib	lity for the grants or as	ssistance, and		N Nos
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	itoning the use of gra	nt funds in th	ne United States				
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes"	overnments and	l Organiz	ations in the Unit	ted States. Comp	lete if the organ	ization answei	red "Yes"
to Form 990, Part IV, line 21, for any recipient that rec Part II can be diminated if additional space is needed	recipient that re-	seived mo	that received more than \$5,000 Check this box if no one recipient received more than \$5,000	neck this box if no	one recipient n	sceived more t	han \$5,000
	ייין אייין	70,17			9		
 (a) Name and address of organization or government 	(p) EIN	(c) IRC section if annifrable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other!	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) FUSE WASHINGTON					(1000)		
1402 THIRD AVENUE							OPERATING GRANT
SEATTLE WA 98101	26-0573960	501 C4	45,000				
(2) PROGRESSIVE MAJORITY ACTION FUND							
615 SECOND AVENUE	7701 03	70	п 1				OPERATING GRANT
WA	27-1881/88	301 C4	12,000				
(3) WASHINGTON BUS PO BOX 20188							TARAS SALTARASE
SEATTLE WA 98102	26-0832933	501 C4	70,000				
IN ACTION		1					
1402 THIRD AVENUE							OPERATING GRANT
SEATTLE WA 98101	26-3921408	501 C4	40,000				
(5) GROVE INSIGHT							
10 SE 10TH AVENUE							NARRATIVE PROJECT
PORTLAND OR 97214	91-1850889	S CORP	35,475				
(9)							
(2)							
(8)			10				
(6)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	rganizations listed in	he line 1 tat	- - - - -				0 🛦
3 Enter total number of other organizations listed in the line 1 table	1 table						22
For Paperwork Reduction Act Notice, see the Instructions for Form 990	юг Fоrm 990.						Schedule I (Form 990) (2011)

Schedule I (F	Schedule I (Form 990) (2011) WASHINGTON PROGRESS	ROGRESS ALLIANCE		20-4258530		Page 2
Part III	Grants and Other Assistance to Individuals	<i>,</i> ,	nited States. Comple	ete if the organization	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 it					
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		reapients	cash grant	non-cash assistance	FMV, appraisal, other)	
_						
7						
ო						
					2	
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Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	uplete this part to provid	de the information rec	quired in Part I, line 2	and any other additional in	nformation

WE REQUIRE A WRITTEN GRANT PROPOSAL AND AN IN-DEPTH WRITTEN YEAR END REPORT THAT OUTLINES ALL PROGRESS MADE ON OBJECTIVES OUTLINED IN THE PROPOSAL. PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

WE MAINTAIN RECORDS ON THE AMOUNTS OF GRANTS WE GIVE EACH YEAR BOTH IN OUR FINANCIAL DOCUMENTS AND OUR DATABASE. OUR ORGANIZATIONS' BYLAWS INCLUDE PART IV - ADDITIONAL INFORMATION INFORMATION ABOUT GRANT PROCESS.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

WASHINGTON PROGRESS ALLIANCE

Employer identification number 20-4258530

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE 990 IS REVIEWED BY THE BOARD BEFORE IT IS SIGNED BY THE BOARD OFFICER

AND FILED ON BEHALF OF THE ORGANIZATION

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
WPA MONITORS THIS WHEN WPA RECRUITS NEW BOARD MEMBERS AND AT ANNUAL BOARD
MEETINGS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL BOARD OF DIRECTORS DETERMINES COMPENSATION BASED ON GROUP REVIEW AND RESEARCH INTO COMPENSATION FOR SIMILAR POSITIONS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

EXECUTIVE DIRECTOR MAKES THE DECISION FOR COMPENSATION BASED ON INDEPENDENT

PERFORMANCE REVIEW BY COLLEAGUES AS WELL AS PERSONAL ASSESSMENT.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THESE DOCUMENTS ARE AVAILABLE UPON REQUEST.

204258530 06/26/2012 8 51 AM

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

WASHINGTON PROGRESS ALLIANCE

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships

▶ See separate instructions. ▶ Attach to Form 990.

Open to Public Inspection 2011

OMB No 1545-0047

Employer identification number 20-4258530

(f)
Dinect controlling
entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) (e) End-of-year assets Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Total income (c) Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of disregarded entity Part II Part Ξ 8 3 € (2)

מוכ או וווסוב וכומנים נמע בעבווולי מולמווידמנים וא מתוווול מוכ ומע לכמו	av Joan /						
(v)	(9)	(9)	(p)	(a)	ω	(6)	(4)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state	Exempt Code section	Public charity status	Direct controlling	Section 51	S(D)(13)
		or foreign country)		(if section 501(c)(3))	entity	Yes	N _o
(1) WASHINGTON PROGRESS FUND							
1402 THIRD AVENUE 26-2868934						,	
SEATTLE WA 98101	CHARITY	WA	501 C3	7	N/A		×
(2)							
	•						
(3)							
						_,	
(4)							
Ê							
			•			-	
(9)							

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

Schedule R (Form 990) 2011

204258530 08282012 851 AM Schedule R (Form 990) 2011

m 990) 2011 WASHINGTON PROCRESS ALLIANCE 20-4258530 Page 2 Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34	(i)					Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(d) (e) (f) (g) (h) Direct controlling Type of entry Share of total Share of contrage Percentage entry (C copp. S copp. income end-of-year assets ownership or tuts! or tuts! or tuts! or tuts!				
20-4258530 Partnership (Complete if	Dred controlling norme (related, unrelated from tax under from tax					Corporation or Trust (Contracted as a corporation of	(c) (d Legal domicile Direct co (state or enti				
SS ALLIANCE ons Taxable as a	Primary advity (c) Primary advity (c) (state or (orange) (orange)					ons Taxable as a	(b) Primary activity				
Schedule R (Form 990) 2011 WASHINGTON PROGRESS Part III Identification of Related Organizations Part III heavilies it had one or more related organized.	Name, address, and EIN of related organization					Identification of Related Organization ine 34 because it had one or more re	(a) Name, address, and ElN of related organization				
Schedule R (F		£	(2)	(£)	(4)	Part IV		£	(2)	<u>(6)</u>	4)

Page 3

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Yes

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20-4258530

WASHINGTON PROGRESS ALLIANCE

Schedule R (Form 990) 2011

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36) Part V

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listed in Parts II, III	101
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Note. Complete	A District to the control of the con

- During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
 - Receipt of (i) interest (ii) annuites (iii) royaltes or (iv) rent from a controlled entity **b** Gift, grant, or capital contribution to related organization(s)

 - c Gift, grant, or capital contribution from related organization(s)
 - d Loans or loan guarantees to or for related organization(s)
 - e Loans or loan guarantees by related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- j Lease of facilities, equipment, or other assets from related organization(s)
- k Performance of services or membership or fundraising solicitations for related organization(s)
 - Performance of services or membership or fundraising solicitations by related organization(s)
- Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)
 - n Shanng of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses 0
- p Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)
- r Other transfer of cash or property from related organization(s)

2 If the answer	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	duding covered relation	ships and transaction three	holds
	(e)	(q)	(0)	(p)
	Name of other organization	Transaction	Amount involved	Method of determining
		type (a-r)		amount involved
(1)	WASHINGTON PROGRESS FUND	M	15,378	STAFF TIME ALLOCATION
(2)	WASHINGTON PROGRESS FUND	N	99,094	99,094 STAFF TIME ALLOCATION
(3)	WASHINGTON PROGRESS FUND	ц	14,199	DIRECT EXPENSES
(4)	WASHINGTON PROGRESS FUND	В	5,000	DIRECT EXPENSES
(2)				
(9)				

Schedule R (Form 990) 2011

Page 4

Schedule R (Form 990) 2011

Part VI

WASHINGTON PROGRESS ALLIANCE

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

20-4258530

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

(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant uncome (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	Share of end-of-year assets	(h) Disproportionate allocatoris?	_	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(I) General or managing partner?		(k) Percentage ownership
(1)		Country)		Yes	0		Yes	2		Yes	۶ 2	
(2)												
(3)												
(4)												
(5)												
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(Δ)												
(8)												
(6)												
(10)												
(11)					<u> </u>							
			·						Schedule R (Form 990) 2011	R (F	066 ш) 2011

WASHINGTON PROGRESS ALLIANCE Schedule R (Form 990) 2011

20-4258530

Page 5

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)	6/26/2012 8:50 AM		Fund Raising	}	Fund Raising	
Federal Statements Federal Statements		-employee)	Management & General	Şi	Management & General	
Federal St. Form 990, Part IX, Line 11g - Other Form 990, Part IX, Line 12d S 5, 542 Form 990, Part IX, Line 24 Form 990, Part IX, Line 24 Total Form 990, Part IX, Line 24 Form 990, Part IX,	atements	Fees for Service (Non	Progr Servi	le - All Other Expense	Program Service	
ption Form 990, Par		t IX, Line 11g - Other	Tot: Expen	m 990, Part IX, Line 24	Total	•
	TON PROGRESS ALLI	Form 990, Par	Description	For	Description	

204258530 WASHINGTON PROGRESS ALLIANCE

20-4258530

Federal Asset Report Form 990, Page 1 06/26/2012 8:50 AM

FYE: 12/31/2011

<u>Asset</u>	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Pnor_	Current_
	Depreciation: HP Computer Total Other Depreciation	2/23/10	1,059 1,059			1,059 1,059	5 MO S/L	212 212	212 212
	Total ACRS and Other Deprec	iation	1,059			1,059		212	212
	Grand Totals Less: Dispositions and Transfe Less: Start-up/Org Expense Net Grand Totals	rs -	1,059 0 0 1,059			1,059 0 0 1,059		212 0 0 212	212 0 0 212

204258530 WASHINGTON PROGRESS ALLIANCE

20-4258530

AMT Asset Report Form 990, Page 1 06/26/2012 8:50 AM

FYE: 12/31/2011

Asset Description	Date n In Service		Bus Sec <u>%</u> 179Bonus f	Basis for Depr PerConv Meth	Prior Current
Other Depreciation: 1 HP Computer Total Other De	2/23/10 _epreciation _	0	_	0 0 HY	00
Total ACRS ar	nd Other Depreciation	0	_	0	00
Grand Totals Less: Dispositi Net Grand Tot	ons and Transfers	0 0	_	0 0 0	0 0 0 0

204258530 WASHINGTON PROGRESS ALLIANCE
20-4258530 Depreciation Adjustment Report

FYE: 12/31/2011

All Business Activities

06/26/2012 8:50 AM

Form Unit Asset Description

There are no assets that meet the criteria of this report

AMT

AMT Adjustments/ Preferences

FYE: 12/31/2011

204258530 WASHINGTON PROGRESS ALLIANCE
20-4258530 Future Depreciation Report FYE: 12/31/12

Form 990, Page 1

06/26/2012 8:50 AM

Asset	Description	Date In Service	Cost	Tax	AMT
Other I	Depreciation:				
1	HP Computer Total Other Depreciation	2/23/10	1,059	212	0 0
	Total ACRS and Other Depreciation		1,059	212	0
	Grand Totals		1,059	212	0

Form 4562

Department of the Treasury Internal Revenue Service Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172 2011

Attachment Sequence No

(99)

► See separate instructions.

Attach to your tax return.

HINGTON PROGRESS ALLIANCE 1dentrifying number 20-42585

	WASHING	TON PROGRE	22 WITTIAM	CE			120-	425	3330
	ss or activity to which this form relates NDIRECT DEPRECIATI	ON							
	rt I Election To Expen		erty Under Se	ction 179					
	Note: If you have a				elamo	te Part I			
1	Maximum amount (see instructions)			<u> </u>				1	500,000
2	Total cost of section 179 property p	laced in service (see	instructions)					2	
3	Threshold cost of section 179 prope	erty before reduction i	n limitation (see inst	tructions)				3	2,000,000
4	Reduction in limitation Subtract line	3 from line 2 If zero	or less, enter -0-					4	
5	Dollar limitation for tax year Subtract line	4 from line 1 If zero or	r less, enter -0- If mar	ned filing separately, se	e instru	ctions		5	
6	(a) Description	of property	·	(b) Cost (business use on	ly)	(c)	Elected cost		
7	Listed property Enter the amount fr			1	_7_				
8	Total elected cost of section 179 pro		ın column (c), lınes	6 and 7				8	
9	Tentative deduction Enter the small							9	
10	Carryover of disallowed deduction fr	•						10	· · ·
11	Business income limitation Enter th		•	,	ee inst	ructions)		11	
12	Section 179 expense deduction Add			nan line 11				12	
13 Note	Carryover of disallowed deduction to Do not use Part II or Part III below			<u></u>	13				
	rt II Special Depreciation		•	noistion (Do no	4 incl	ıda listas	l proport	. \ /C	'aa inataustiana\
14	Special depreciation allowance for d				LIIICI	ue iistet	propert	y.) (S	ee instructions)
14	during the tax year (see instructions		si ulan listed proper	ty) placed in Scivice				14	
15	Property subject to section 168(f)(1)							15	
16	Other depreciation (including ACRS							16	212
	rt III MACRS Depreciati		de listed proper	tv.) (See instruc	tions)			
		100 1100 1101	Section						
17	MACRS deductions for assets place	ed in service in tax ye	ars beginning before	e 2011				17	0
18	If you are electing to group any assets placed in	n service during the tax year	into one or more general	asset accounts, check here	•				
	Section B	Assets Placed in Se	rvice During 2011	Tax Year Using th	e Gen	eral Depre	ciation Sy	stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depred (business/investment only-see instruction	use (a) Nacovary	(e)	Convention	(f) Metho	d	(g) Depreciation deduction
19a	3-year property]							
b	5-year property								
<u> </u>	7-year property				<u> </u>				
<u>d</u>	10-year property								
<u>e</u>	15-year property				1				
f_	20-year property				1				
<u>g</u>	25-year property			25 yrs			S/L		
h	Residential rental			27 5 yrs	1	MM	S/L		
	property			27 5 yrs	-	MM	S/L		
1	Nonresidential real property			39 yrs	-	MM	S/L		
		pote Blood in Sen	ioo During 2044 T	av Vans Haine the	Alton	MM	S/L		
20-		ssets Placed in Serv	nce During 2011	ax rear Using the	Airern	auve Depr		ysiem	**
20a	Class life	1		42	1		S/L		
	12-year	<u> </u>		12 yrs	+	N 4 N 4	S/L		··········
	40-year Int IV Summary (See inst	ructions \	<u> </u>	40 yrs		MM	S/L	,	
<u></u> 21	•							24	
21 22	Listed property Enter amount from Total. Add amounts from line 12, lin		ae 10 and 20 in asl	imp (a) and line 24	Entor	horo		21	
	and on the appropriate lines of your			107.		11616		22	212
23	For assets shown above and placed	•	•			T			
	portion of the basis attributable to si	•	when year, cite	u iC	23				
	political trip paging autinousagine to s	JOSSII LOUIT WOW		<u> </u>	, 20				

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2011)

Form 8868

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

Internal Rev	enue Service								
• If you a	are filing for an Automatic 3-Month Extension, o	omplete c	only Part I and check the	is box		🕨 🗸			
• If you a	are filing for an Additional (Not Automatic) 3-Mo	nth Exten	sion, complete only Pa	rt II (on page 2 of	this	form).			
Do not d	complete Part II unless you have already been g	ranted an	automatic 3-month exte	nsion on a previou	ısly fi	led Form 8868.			
a corpor 8868 to Return 1	nic filing (e-file). You can electronically file Form ration required to file Form 990-T), or an additional request an extension of time to file any of the for Transfers Associated With Certain Personal ons). For more details on the electronic filing of the	al (not auto orms listed Benefit C	omatic) 3-month extension of in Part I or Part II with Contracts, which must	on of time. You can the exception of the sent to the IF	an ele Forr RS in	ectronically file Form n 8870, Information paper format (see			
Part I	Automatic 3-Month Extension of Time	. Only sub	omit original (no copie	s needed).					
-	ration required to file Form 990-T and requestly	sting an a		nsion-check thi		·			
All other	corporations (including 1120-C filers), partnership	ips, REMIC	s, and trusts must use	Form 7004 to requ	uest a	an extension of time			
to file inc	come tax returns.								
			En	ter filer's identifyin	g nun	nber, see instructions			
Type or	Name of exempt organization or other filer, see in	structions.		Employer identif	icatio	n number (EIN) or			
print	WASHINGTON PROGRESS ALLIANCE					58530			
File by the	Number, street, and room or suite no. If a P.O. bo	x, see instr	uctions.	Social security r	umbe	er (SSN)			
due date fo	or 1402 THIRED AVE STE 201								
filing your return See	City, town or post office, state, and ZIP code. For	a foreign a	ddress, see instructions.						
instruction	s. SEATTLE, WA 98101			·					
Enter the	e Return code for the return that this application	s for (file a	separate application for	each return) .		0 1			
Applica	ation	Return	Application			Return			
Is For		Code	is For			Code			
Form 9	90	01	Form 990-T (corporation	on)		07			
Form 9		02	Form 1041-A			08			
Form 9		01	Form 4720			09			
Form 9		04	Form 5227			10			
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069						
Form 9	90-T (trust other than above)	06	Form 8870			12			
	ooks are in the care of ► SARAH JAYNES one No. ► 206-324-2741	 F.	AX No. ►						
• If the c	organization does not have an office or place of b	usiness in 1	the United States, check	this box		· > 🗆			
• If this i	s for a Group Return, enter the organization's fou	ır dıgit Gro	up Exemption Number (GEN)		. If this is			
for the w	whole group, check this box \ldots \blacktriangleright \square . If i	it is for par	t of the group, check thi	s box	▶ [and attach			
	h the names and EINs of all members the extensi								
1 I	request an automatic 3-month (6 months for a co	rporation r	required to file Form 990)-T) extension of ti	me				
u	intil AUG 15TH , 20 12 , to file the exer	npt organiz	zation return for the orga	anızatıon named a	bove.	The extension is			
fe	or the organization's return for:								
Þ	► ☑ calendar year 20 <u>11</u> or								
▶ ☐ tax year beginning, 20, and ending, 20									
	the tax year entered in line 1 is for less than 12 n	nonths, ch	eck reason: Initial ref	turn	urn				
	Change in accounting period	·							
	this application is for Form 990-BL, 990-PF, 990 onrefundable credits. See instructions.)-T, 4720,	or 6069, enter the tenta	tive tax, less any	3a	\$			
	this application is for Form 990-PF, 990-T, 4	1720. or 6	069 enter any refunda	able credits and	Ja	-			
	stimated tax payments made. Include any prior y				3b	s			
_	Balance due. Subtract line 3b from line 3a. Includ		<u> </u>			·			
	FTPS (Electronic Federal Tax Payment System).				3с	s			
	Saution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-FO and Form 8879-FO for payment instructions								