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A For the 2011 calendar year, or tax year beginning 01-01-2011

As Filed Data -

DLN: 93492228003042

OMB No 1545-1150

Form 990-EZ

Department of the Treasury Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code

(except black lung benefit trust or private foundation) ▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

, and ending 12-31-2011

Open to Public Inspection

B Check if applicable			C Name of organization WASHINGTON BUSINESS ALLIANCE		D Emplo	yer id	dentification number		
Address change Name change		-			27-23	55142			
Name change Initial return			Number and street (or P O box, if mail is not delivered to street address) Room/s PO BOX 64	E Teleph	E Telephone number				
Terminated							(206) 319-1124		
Amended return Application pending City or town, state or country, and ZIP + 4 SEATTLE, WA 98111				F Group Exemption Number ►					
ΙW	ebsite	 www.wabu	Cash Accrual Other (specify) SINESSALLIANCE ORG only one) — 501(c)(3) 501(c)(4) (insert no) 4947(a)(1) or 527	require	d to attac	h Sc	rganization is not hedule B or 990-PF)		
norm	nally n	not more than	anization is not a section 509(a)(3) supporting organization or a sectio \$50,000 A Form 990-EZ or Form 990 return is not required though organization chooses to file a return, be sure to file a complete return	Form 990-N (
			o line 9 to determine gross receipts, If gross receipts are \$200,000 or more, or if total and of Form 990-EZ * \$ 154,525	assets (Part II, lır	e 25, colun	nn (B)	below) are \$500,000 or		
_	rt I		e, Expenses, and Changes in Net Assets or Fund Balance	ces (See the	nstructio	ns fo	r Part I)		
			e organization used Schedule O to respond to any question in this Part			•			
	1	Contribution	s, gifts, grants, and similar amounts received			1	154,525		
	2	Program ser	vice revenue including government fees and contracts		· L	2			
	3	Membership	dues and assessments			3			
	4	Investment	income		· L	4			
	5a	Gross amou	nt from sale of assets other than inventory	a					
를	ь	Less cost o							
Revenue	С	Gain or (loss		5c					
2	6	Gaming and							
	a	Gross income fi							
	b	Gross incom reported on (\$15,000)	S						
			61)					
	С	Less direct	expenses from gaming and fundraising events 6	с					
	d	Net income	or (loss) from gaming and fundraising events (Add lines 6a and 6b and	subtract line 6	Sc)	6d			
	7a	Gross sales	of inventory, less returns and allowances	a					
	ь	Less cost o	fgoods sold	b					
	c	Gross profit	or (loss) from sales of inventory (Subtract line 7b from line 7a) .			7c			
	8	Other reven	ue (describe in Schedule O)			8			
	9	Total revenu	ie. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9	154,525		
	10	Grants and s	similar amounts paid (list in Schedule O)			10			
	11	Benefits paid	d to or for members		·	11			
	12	Salaries, oth	er compensation, and employee benefits		·	12	79,720		
2 0 5	13	Professional	fees and other payments to independent contractors			13	62,377		
Expenses	14	Occupancy,	rent, utilities, and maintenance		·	14	3,200		
Ä	15		lications, postage, and shipping		·	15	1,428		
	16		ses (describe in Schedule O)	•	_	16	10,324		
	17		ses. Add lines 10 through 16			17	157,049		
5 S	18		leficit) for the year (Subtract line 17 from line 9)		·	18	-2,524		
5 S S	19		or fund balances at beginning of year (from line 27, column (A)) (must a	gree with					
Net.Assets		•	figure reported on prior year's return)		⊢	19	6,143		
	20		es in net assets or fund balances (explain in Schedule O)		. ·	20	_		
	21	Net assets o	or fund balances at end of year Combine lines 18 through 20			21	3,619		

Form 990-EZ (2010)					Page 2
Part II Balance Sheets Check if the organization used	I Schedule O to respond to	any question in this P	art II		.
	tions for Part II)) Beginning of year		(B) End of year
22 Cash, savings, and investments .	tions for Fart II)	(A	6,143	22	14,874
23 Land and buildings			3,113	23	11,071
24 Other assets (describe in Schedule O)			24	6,632
25 Total assets			6,143	25	21,506
26 Total liabilities (describe in Schedule	0)			26	17,887
27 Net assets or fund balances (line 27 o		•	6,143	27	3,619
Part III Statement of Program Check if the organization used	_		art III . 🔽	/P.o.	Expenses quired for section 501
What is the organization's primary exempt TO HELP SOLVE WASHINGTON STATE'S EDUCATION, ENVIRONMENTAL SUSTA TRANSPORTATION WE ARE COMMITTE POLITICAL EXPEDIENCY OR IDEOLOGY LONG-TERM RESULTS VISION TO BE A RESIDENTS ENJOY A HIGH QUALITY OF NATION BY 2030 BASED UPON METRIC ECONOMIC DEVELOPMENT, TRANSPORT Describe the organization's program service measured by expenses In a clear and combenefited, and other relevant information for the service of the servic	purpose? 5 GREATEST CHALLENGE INABILITY, FISCAL GOVE ED TO DEVELOPING EFFE Y, WITH AN EMPHASIS ON A PROSPEROUS STATE W F LIFE GOAL TO BE RATION, AND ENVIRONI E accomplishments for each cise manner, describe the sor each program title TTEES ASSOCIATED WIT ISPORTATION AND ENVI	S IN THE AREAS OF ERNANCE, HEALTH, A CTIVE SOLUTIONS IN DATA-BASED SOLUTIONS IN DATA-BASED SOLUTIONS IN THE ENDING THE FIVE CONNERS OF THE FIVE RONMENT COMMITTED TO THE FIVE ROMENT COMMITTED TO THE FIVE ROMENT COMMITTED TO THE FIVE ROMENT COMMITTED TO THE FIVE RONMENT COMMITTED TO THE FIVE ROMENT COMMITTED TO	PUBLIC AND REGARDLESS OF JITIONS FOR HRIVE AND ONE STATE IN THE NAGEMENT AND program services, as number of persons E ISSUE AREAS TEES MEET	(c)(orga 494 opti	3) and 501(c)(4) anizations and section 7(a)(1) trusts, ional for others)
BETWEEN FIVE AND FIFTEEN VOLUNTE MEMBER AS OF APRIL 2011, THEY ARE MEETINGS TO INFORM OURSELVES AB READINGS, AND VIDEOS WE HAVE ALS THE COMMITTEE OUR GOALS IS TO HY TIME AND TALENTS TO ASSIST THE ST WE HAVE ALSO BEGAN WORKING ON D MEMBERS VOLUNTEER THEIR TIME TO WORKED WITH THE STATE COMMERCE REPRESENTATIVES - TO PROVIDE GUI AFFECTING MANUFACTURING COMPAN ADDRESSING RESTAURANT REGULATION TO HELP DESIGN A STATE-BASED, SMAP OTENTIALLY IMPACT HUNDREDS OF HAVE ALSO MET WITH NON-PROFIT ACKNON-PROFIT AGENCIES INCLUDE EXCENVIRONMENTAL COUNCIL, THE WASHMANUFACTURING INDUSTRIAL COUNCINSTITUTE, THE DIRECTORS OF THE SICOMMERCE, AND THE WASHINGTON ROTHE GOVERNMENT OFFICIALS INCLUD WASHINGTON STATE TREASURER AND AND BUDGET AND HIS DEPUTY, THE DIDEPUTIES, KING COUNTY EXECUTIVE AND STATE SENATE MAJORITY LEADER SECRETARY OF STATE RALPH MUNRO, THOMPSON	ERS SERVING ON THEM, ALL MEETING MONTHLY OUT THE ISSUES BY HEA TO USED THE TIME TO PUT TO AVE ACTIVITIES WHERE THE IN ACHIEVING BETT EMONSTRATION PROJECT TEST A CONCEPT OR HE DEPARTMENT - BY DONA DANCE ON HOW TO BEST VIES WE ARE NOW WORK ONS WE ARE ALSO PART THE BUSINESS CREDIT FA PEOPLE AND SMALL BUSI GENCIES, COMMUNITY LE TELLENT SCHOOLS NOW, HINGTON CLEAN TECHNO TIL, THE LEAGUE OF EDUCE THE WASHINGTON STA HIS DEPUTY, THE DIRECT RECTOR OF THE STATE IS THE WORK ON THE COME	AND ARE CHAIRED IN WE HAVE PRINCIPARING FROM GUEST STATEMENT OF THE REGISTRATE OF THE STATEMENT OF THE STATE	BY A VOLUNTEER ALLY USED THESE SPEAKERS, TEGIC PLANS FOR TRIBUTE THEIR ACH ISSUE AREA JECTS WHERE M) WE HAVE MEMBER BUSINESS ULATIONS PROJECT ARATE INITIATIVE JECTS FOUR WORK, WE OFFICIALS THE JES SEATTLE JE DISCOVERY SIDE CHAMBER OF ATED, AND SIRTI HIS DEPUTY, THE OF MANAGEMENT MMERCE AND HIS E FRED JARRETT, JICLUDE FORMER		135,327
29	s amount metades foreign g	grants, eneck here		204	135,327
<u> </u>	s amount includes foreign o	grants, check here .	▶ ┌	29a	
30					
(0		tata la la	. –		
· · · · · · · · · · · · · · · · · · ·	s amount includes foreign (•	· · • F	30a	
31 Other program services (describe in Sc (Grants \$) If thi	hedule O) s amount includes foreign ç		▶ ┌	31a	
32 Total program service expenses (add lin	es 28a through 31a) .		▶	32	135,327
Part IV List of Officers, Directors, Tru					s for Part IV)
Check if the organization used	(b) Title and average	(c) Compensation	art IV (d) Contribution		(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit p	lans &	
See Additional Data Table		,			
	i	i	1		1

	Check if the organization used Schedule O to respond to any question in this	s Part V	厂					
				Yes	No			
33	Did the organization engage in any significant activity not previously reported to the detailed description of each activity in Schedule O	33		No				
34	Were any significant changes made to the organizing or governing documents? If "Y of the amended documents if they reflect a change to the organization's name. Othe Schedule O (see instructions)			No				
35	If the organization had income from business activities, such as those reported on I others), but not reported on Form 990-T, explain in Schedule O why the organizatio Form 990-T							
а	Did the organization have unrelated business gross income of $$1,000$ or more during activities (such as those reported on lines 2, 6a, and 7a, among others)?	g the year from business	35a		No			
b	If 'Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' prov Schedule O	ide an explanation in	35b					
C	Was the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization subnotice, reporting, and proxy tax requirements during the year? If Yes,' complete Sch		35c		No			
36	Did the organization undergo a liquidation, dissolution, termination, or significant distinct the year? If "Yes," complete applicable parts of Schedule N 23	sposition of net assets du	rıng 36		No			
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a						
b	Did the organization file Form 1120-POL for this year?		37b		No			
	Did the organization borrow from, or make any loans to, any officer, director, trustee							
Jou	any such loans made in a prior year and still outstanding at the end of the tax year of		38a		No			
_		i i	364		INO			
Ь	If "Yes," complete Schedule L, Part II and enter the total amount involved .	38b						
39	Section 501(c)(7) organizations. Enter							
а	Initiation fees and capital contributions included on line 9	39a						
b	Gross receipts, included on line 9, for public use of club facilities	39b						
40a	Section $501(c)(3)$ organizations. Enter amount of tax imposed on the organization duri	ng the year under						
	section 4911 , section 4912 , section 4912	<u> </u>						
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any sector transaction during the year or did it engage in an excess benefit transaction in a price reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, P	tion 4958 excess benefit or year that has not been						
			40b		No			
c	Section $501(c)(3)$ and $501(c)(4)$ organizations Enter amount of tax imposed on organization disqualified persons during the year under sections $4912,4955,$ and 4958	_						
d	Section $501(c)(3)$ and $501(c)(4)$ organizations Enter amount of tax on line $40c$ rein organization	mbursed by the						
е	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T				No			
41	List the states with which a copy of this return is filed 🕨 WA							
42a	The organization's books are in care of ► WASHINGTON BUSINESS ALLIANCE Telephone no ► (206) 579-9440							
	PO BOX 64 Located at ► <u>SEATTLE, WA</u> ZIP + 4 ► <u>98111</u>							
h	At any time during the calendar year, did the organization have an interest in or a si							
D	over a financial account in a foreign country (such as a bank account, securities account)?	42b	Yes	No No				
	If "Yes," enter the name of the foreign country							
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.							
c	At any time during the calendar year, did the organization maintain an office outside	of the U S ?	42 c		No			
	If "Yes," enter the name of the foreign country							
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here							
				Yes	No			
44a	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be c	ompleted instead of		res	NO			
	Form 990-EZ.		44a		No			
b	Did the organization operate one or more hospital facilities during the year? If 'Yes,' instead of Form990-EZ			No				
c	c Did the organization receive any payments for indoor tanning services during the year?				No			
d	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments in Schedule O	tion 44c						
45a	45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?				NI c			
A	Did the organization receive any new rest from the second	optrollod antitional at	45a		No			
45D	45b Did the organization receive any payment from or engage in any transaction with a controlled entity within th meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)							

Part V Other Information (Note the statement requirements in the instructions for Part V.)

Form 990	-EZ (2011)							Page 4
46 Did	the organization engage, directly o	or indirectly, in political (campaign activities (on behalf of or 11	n opposition to		Yes	No
	didates for public office? If "Yes,"					46		No
Part V	Section 501(c)(3) orga All section 501(c)(3) organ 47-49b and 52.						_	stions
	Check if the organization used	Schedule O to respond	to any question in th	us Part VI .				<u></u>
							Yes	No
	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							
48 Is t	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E							
49a Dıd	19a Did the organization make any transfers to an exempt non-charitable related organization?					49a		
b If"	Yes," was the related organization	a section 527 organizat	ion?			49b		
	mplete this table for the organization							
	ployees) who each received more t 	han \$100,000 of compe (b) Title and average	nsation from the org		re is none, ente			ns e
	ne and address of each employee oald more than \$100,000	hours per week	(c) Compensati	on employee	benefit plans &			and
<u>.</u>	,	devoted to position		deferred	compensation	otne	erallow	ances
f To		+100000						
• 10	otal number of other employees pa	id 0ver \$100,000 .						
	mplete this table for the organization			ontractors who	each received r	nore th	an \$10	0,000
	ompensation from the organizatior Name and address of each indeper			(b) Typ	e of service	(c) (ompen	sation
<u>(a)</u>	ivallie and address of each indeper	dent contractor paid ino	ne than \$100,000	(b) 1 y p	e or service	(6)	. ompen	<u>sation</u>
d Τα	otal number of other independent c	ontractors each receivin	ug over \$100,000	<u> </u>				
	rid the organization complete Sche		- '	ations and 494	7(a)(1) nonexer	mpt cha	arıtable	trusts
m	nust attach a completed Schedule	A				۲۱	Yes ┌	No
	alties of perjury, I declare that I have							
knowledge			,-				p. 9p 5	
				1				
Sign	Signature of officer	Signature of officer Date						
Here	DAVID GIULIANI CHAIRMAN							
	Type or print name and title	I.			I			
Paid	Preparer's signature EJ KIM		ate 012-08-14	Check if self-	Preparer's taxpay (See instructions		ification i	number
Paid Preparer'	employed • F							
Use Only	if self-employed), address, and ZIP + 4 1607 DEXTER AVE N STE 1B							
	Phone no ▶ (20						0497	
May the I	RS discuss this return with the pre		e instructions		•	ΓY	es 「	No

Additional Data

Software ID: Software Version:

EIN: 27-2355142

Name: WASHINGTON BUSINESS ALLIANCE

Form 990-EZ, Special Condition Description:

Special Condition Description

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
DAVID GIULIANI 🕏 PO BOX 64 SEATTLE, WA 98111	CHAIR 1 00	0		
HOWARD BEHAR D PO BOX 64 SEATTLE, WA 98111	VICE-CHAIR 1 00	0		
NORM LEVY D PO BOX 64 SEATTLE, WA 98111	BOARD MEMBER 1 00	0		
ROZ SOLOMON PO BOX 64 SEATTLE, WA 98111	COO 32 00	61,998		
G SCOTT GREENBURG PO BOX 64 SEATTLE, WA 98111	BOARD MEMBER 1 00	0		
DEBORAH J GAVIN [®] PO BOX 84 SEATTLE,WA 98111	BOARD MEMBER 1 00	0		

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OMB No 1545-0047

Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Name of the organization WASHINGTON BUSINESS ALLIANCE

Employer identification number

27-2355142

Identifier	Return Reference	Explanation
OTHER EXPENSES	FORM 990- EZ, PART I, LINE 16	EXPENSES OFFICE SUPPLIES 542 TELEPHONE / INTERNET 187 IT SERVICES 3,124 WEBSITE EXPENSES 1,448 TRAVEL 891 CONFERENCES / MEETINGS 523 LICENSING AND FEES 145 BANK FEES 212 DUES & SUBSCRIPTIONS 3,252 TOTAL 10,324
OTHER ASSETS	FORM 990- EZ, PART II, LINE 24	ACCOUNTS RECEIVABLE 0 6,632 TOTAL 0 6,632
OTHER LIABILITIES	FORM 990- EZ, PART II, LINE 26	ACCOUNTS PAYABLE AND ACCRUED EXPENSES 0 15,241 PAYROLL LIABILITIES 0 2,646
PRIMARY EXEMPT PURPOSE	FORM 990- EZ, PART III	TO HELP SOLVE WASHINGTON STATE'S GREATEST CHALLENGES IN THE AREAS OF PUBLIC EDUCATION, ENVIRONMENTAL SUSTAINABILITY, FISCAL GOVERNANCE, HEALTH, AND TRANSPORTATION WE ARE COMMITTED TO DEVELOPING EFFECTIVE SOLUTIONS REGARDLESS OF POLITICAL EXPEDIENCY OR IDEOLOGY, WITH AN EMPHASIS ON DATA-BASED SOLUTIONS FOR LONG-TERM RESULTS VISION TO BE A PROSPEROUS STATE WHERE BUSINESSES THRIVE AND RESIDENTS ENJOY A HIGH QUALITY OF LIFE GOAL TO BE RATED AS THE NUMBER ONE STATE IN THE NATION BY 2030 BASED UPON METRICS FOR HEALTH, EDUCATION, FINANCIAL MANAGEMENT AND ECONOMIC DEVELOPMENT, TRANSPORTATION, AND ENVIRONMENT
FIRST ACCOMPLISHMENT	FORM 990- EZ, PART III, LINE 28	THERE ARE MEMBER-BASED COMMITTEES ASSOCIATED WITH EACH OF THE FIVE ISSUE AREAS LISTED ABOVE (CURRENTLY, THE TRANSPORTATION AND ENVIRONMENT COMMITTEES MEET TOGETHER) THE COMMITTEES BEGAN MEETING IN THE FALL OF 2010. THE COMMITTEES HAVE BETWEEN FIVE AND FIFTEEN VOLUNTEERS SERVING ON THEM, AND ARE CHAIRED BY A VOLUNTEER MEMBER AS OF APRIL 2011, THEY ARE ALL MEETING MONTHLY. WE HAVE PRINCIPALLY USED THESE MEETINGS TO INFORM OURSELVES ABOUT THE ISSUES BY HEARING FROM GUEST SPEAKERS, READINGS, AND VIDEOS WE HAVE ALSO USED THE TIME TO PUT TOGETHER STRATEGIC PLANS FOR THE COMMITTEE OUR GOALS IS TO HAVE ACTIVITIES WHERE MEMBERS WILL CONTRIBUTE THEIR TIME AND TALENTS TO ASSIST THE STATE IN ACHIEVING BETTER OUTCOMES IN EACH ISSUE AREA WE HAVE ALSO BEGAN WORKING ON DEMONSTRATION PROJECTS (THESE ARE PROJECTS WHERE MEMBERS VOLUNTEER THEIR TIME TO TEST A CONCEPT OR HELP SOLVE A PROBLEM). WE HAVE WORKED WITH THE STATE COMMERCE DEPARTMENT - BY DONATING THE TIME OF MEMBER BUSINESS REPRESENTATIVES - TO PROVIDE GUIDANCE ON HOW TO BEST SIMPLRY THE REGULATIONS AFFECTING MANUFACTURING COMPANIES WE ARE NOW WORKING ON A SIMILAR PROJECT ADDRESSING RESTAURANT REGULATIONS WE ARE ALSO PARTICIPATING IN A SEPARATE INITIATIVE TO HELP DESIGN A STATE-BASED, SMALL BUSINESS CREDIT FACILITY THESE PROJECTS POTENTIALLY IMPACT HUNDREDS OF PEOPLE AND SMALL BUSINESS CREDIT FACILITY THESE PROJECTS POTENTIALLY IMPACT HUNDREDS OF PEOPLE AND SMALL BUSINESS CREDIT FACILITY THESE PROJECTS POTENTIALLY IMPACT HUNDREDS OF PEOPLE AND SMALL BUSINESS CREDIT FACILITY THESE PROJECTS POTENTIALLY IMPACT HUNDREDS OF PEOPLE AND SMALL BUSINESS CREDIT FACILITY THESE PROJECTS POTENTIALLY IMPACT HUNDREDS OF PEOPLE AND SMALL BUSINESS CREDIT FACILITY THESE PROJECTS POTENTIALLY IMPACT HUNDREDS OF PEOPLE AND SMALL BUSINESS CREDIT FACILITY. THE SEATTLE MANUFACTURING INDUSTRIAL COUNCIL, THE WASHINGTON CLEAN TECHNOLOGY ALLIANCE, THE SEATTLE MANUFACTURING INDUSTRIAL COUNCIL, THE LEAGUE OF EDUCATION VOTERS, THE DISCOVERY INSTITUTE, THE DIRECTORS OF THE SEATTLE CHAMBER OF COMMERCE, A

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TY 2011 Compensation Explanation

Name: WASHINGTON BUSINESS ALLIANCE

EIN: 27-2355142

Person Name	Explanation
DAVID GIULIANI	
HOWARD BEHAR	
NORM LEVY	
ROZ SOLOMON	
G SCOTT GREENBURG	
DEBORAH J GAVIN	