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Form **990**

Department of the Treasury Internal Revenue Service

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)

benefit trust or private foundation)

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

2011
Open to Public Inspection

A F	or the	2011 calendar year, or tax year beginning and end	ding			
B	Check if applicable	C Name of organization		D Employer identific	ation number	
	Addresi change	Washington Apple Education Foundation		l		
	Name _change	Doing Business As		91-10	538890	
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	E Telephone number			
	Termin- ated	2900 Euclid Avenue		(509)	663-7713	
	Amenda	City or town, state or country, and ZIP + 4		G Gross receipts \$	987,289.	
	Applica tion	Wellattiee, WA 30001		H(a) is this a group re	turn	
	pending	F Name and address of principal officer: Jennifer Witherbee	for affiliates?	Yes X No		
		same as C above		H(b) Are all affiliates incl	uded? Yes No	
1	Гах-ехе	mpt status: 🗶 501(c)(3) 🔲 501(c)()◀ (insert no.) 🔲 4947(a)(1) or [527	If "No," attach a	list. (see instructions)	
		e:▶ www.waef.org		H(c) Group exemption		
		organization: X Corporation Trust Association Other	L Year o	of formation: 1994 M	State of legal domicile: WA	
Pi		Summary				
ø		Briefly describe the organization's mission or most significant activities: ${f The \ Wa}$				
Activities & Governance	-	Foundation fosters educational opportuniti				
Ë	2 (Check this box 🕨 📖 if the organization discontinued its operations or disposed	d of more	than 25% of its net as		
Š	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	24	
•ಶ	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	24	
es	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	4	
š	6	Total number of volunteers (estimate if necessary)		8	100	
Ą	1	Total unrelated business revenue from Part VIII, column (C), line 12		7a	<u><3,196.</u> >	
	<u>b1</u>	Net unrelated business taxable income from Form 990-T, line 34		7ь	<u><1,857.</u> >	
	İ		ļ	Prior Year	Current Year	
ē	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	753,146.	504,394.	
20 Revenue	9 F	Program service revenue (Part VIII, line 2g)	-	0.	0.	
œ	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	219,658.	226,383.	
5	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		169,731.	186,683.	
8	 	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,142,535.	917,460.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	615,461.	707,396.	
ANNED BUILD I	14	Benefits paid to or for members (Part IX, column (A), line 4)		125 404	145 060	
⇉	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		135,484.	145,068.	
en;	16a !	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.	
S	_ b	Total fundraising expenses (Part IX, column (D), line 25) 63,001	<u> </u>	04 000	00 527	
۳	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	84,900.	98,537.	
Ž	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	835,845.	951,001.	
Œ,	19	Revenue less expenses Subtract line 18 from line 12		306,690.	<u><33,541.</u> >	
Net Assette or			Be	ginning of Current Year	End of Year	
SSE	20	Total assets (Part X, line 16)		4,543,699.	4,482,571.	
<u> </u>	21	Total liabilities (Part X, line 26)	-	234,242. 4,309,457.	294,028. 4,188,543.	
	art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		4,303,457.	4,100,343.	
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules a	nd statem	ents and to the hest of m	v knowledge and helief it is	
	•	t, and complete. Declaration of preparer (other than edition) is based on all information of which			y Knowledge and Deller, It is	
1100	5, 001160	t, and compete becarding a preparer comer than exical his vases on as missing in which	ii piepaiei	6.6	17	
Qi.		Signature of officer		Date		
Sig		▲ Jennifer Witherbee, Executive Director				
Type or print name and title						
_		Print/Type preparer's name Pregares's signature	1	Date Check	PTIN	
Pai	d	Philip R. Blakney Jr., CP		7/30/12 self-employe	P00086682	
	parer	Firm's name Cordell, Neher & Company, P.L.L.	c.	Firm's EIN	91-0950793	
	Only	Firm's address P.O. Box 3068				
		Wenatchee, WA 98807-3068		Phone no. (509) 663-1661	
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)		1,	X Yes No	
	001 01-2				Form 990 (2011)	

	990 (2011) Washington Apple Education Foundation 91-16. t III Statement of Program Service Accomplishments	BB9U Page Z
rai		
1	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission:	
•	The Washington Apple Education Foundation fosters educational	
	opportunities, encourages academic excellence and promotes away	areness
	of the values of Washington's tree fruit industry.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the pnor Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a	illocations to
	others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses 32,594 including grants of 26,730) (Revenue \$	
	Farmworker Education - Scholarships for farmworkers	
		
4b	(Code) (Expenses 593, 189 including grants of \$ 520, 570) (Revenue \$)
	Fruit industry scholarships	
	104 500	
4c	(Code) (Expenses \$181,578. including grants of \$160,096.) (Revenue \$)
	Fruit Industry Education	
		
4d	Other program services (Describe in Schedule O.)	
. 🕶	(Expenses \$ including grants of \$) (Revenue \$	}
4e	Total program service expenses ► 807,361.	
		Form 990 (2011)

rar	t IV Checklist of Required Schedules		Yes	No
	In the experience described in section EO1(a)(2) or 4947(a)(1) (other than a private foundation)?		res	NO
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	x	
	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
	Did the organization required to complete Scriedule B, Scriedule of Communicist Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	-		
3	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
	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	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	ı	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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	11b		X
С	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	11c		X
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	11d		X
9	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u></u>	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			ŀ
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	X	ļ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	}]	}
	Schedule D, Parts XI, XII, and XIII	12a	X	<u> </u>
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	12b	ļ. <u></u> .	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		ĺ	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000]]
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	 	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		1	
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	 	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	1		-
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	 	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
46	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 -	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	v	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19	X	
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	† *

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
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 27 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	Ì		
	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 through 24d and complete]	}	}
	Schedule K. If "No", go to line 25	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
¢	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	1	1	
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	ŀ		
	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	İ		İ
	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 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	1	1	[
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		i	
	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, 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	ļ	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	1	1	1
	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 conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		i	ĺ
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	į –	}	
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		ļ	
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	ļ	<u> X</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
þ	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	1		
	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-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	├—	X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			}
	Note. All Form 990 filers are required to complete Schedule O	38	000	1

Form **990** (2011)

Par	990 (2011) Washington Apple Education Foundation tV Statements Regarding Other IRS Filings and Tax Compliance		91-1638	890	P	age (
	Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	2			
	Enter the number of Forms W-2G included in line 1a. Enter 0- if not applicable	1b	1	i		
	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portal	ble gaming			
	(gambling) winnings to prize winners?			1c	X	i
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	- 1				
	filed for the calendar year ending with or within the year covered by this return	2a	4			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3Ь	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?	4a		X
	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 A	ccour	nts.			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e orga	anization 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 contribut	ons o	r gifts			
	were not tax deductible?			6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a	X	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	_X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uıred			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	:t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control			71		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g		ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		├—
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. De					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	e during the year?	_8_	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.			ł	}	
а	Did the organization make any taxable distributions under section 4966?			9a		├—
b	Did the organization make a distribution to a donor, donor advisor, or related person?			<u>96</u>	 	╀
10	Section 501(c)(7) organizations. Enter:		1	1	}	1
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	· 	ł	1	İ
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u> </u>	1		1
11	Section 501(c)(12) organizations. Enter:	١	l	ļ	•	
a	Gross income from members or shareholders	11a		1	ŀ	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	445			}	1
40	amounts due or received from them.)	11b		40-		}
		ı	ĺ	12a	 	┼─
_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	L.—,	1	}	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			49-	 -	┼
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	 	+
_	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the					
U	organization is licensed to issue qualified health plans	13b				
	organization to house to lead qualities restain plans	<u> </u>		_	1	1

14b Form **990** (2011)

14a

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

	Check if Schedule O contains a response to any question in this Part VI			X					
<u>Sec</u>	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 24								
	If there are material differences in voting rights among members of the governing body, or if the governing	1							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
ь	Enter the number of voting members included in line 1a, above, who are independent 24			ı					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	ĺ							
	officer, director, trustee, or key employee?	2		<u>X</u>					
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X_					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?	6		X					
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		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7ь		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	X						
ь	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13	X						
14	Did the organization have a written document retention and destruction policy?	14	X						
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?								
а	The organization's CEO, Executive Director, or top management official	15a	X						
b	Other officers or key employees of the organization	15b		X					
	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 with a								
	taxable entity during the year?	16a		X					
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 organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed None								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) is	availab	le	—					
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website Upon request								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	cial						
	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨	·						
	Washington Apple Education Foundation - (509) 663-7713								
	2900 Euclid Ave, Wenatchee, WA 98801								
13200	6		000	(0044)					

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Washington Apple Education Foundation

91-1638890

Page 7

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

(A) Name and Title	(B) Average hours per week	box	not c	Pos heck sa pa	rson	than o	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Steve Clive								}		
Immediate Past Chairman	1.00	X	L_	L_		_		0.	0.	0.
(2) Berti Stewart		ĺ	ľ						_	_
Chairman	1.00	X	ļ	<u> </u>	<u> </u>	<u> </u>		0.	0.	0.
(3) Stan Scheumann		l								
Treasurer	1.00	X		<u> </u>	<u> </u>	<u> </u>		0.	0.	0.
(4) Ruth Pringle					l					_
Director	1.00	X	<u> </u> _	ļ	┞—	 		0.	0.	0.
(5) Cory Groves										
Director	1.00	X	<u> </u>	-	├	⊢		0.	0.	0.
(6) Bruce Frazier	1 00									
Director	1.00	X	_	 	├	-	-	0.	0.	0.
(7) Dan Plath	1 00	,,								•
Director	1.00	X	-		┢	-	-	0.	0.	0.
(8) David Ramynke	1 00		1		ł		ľ	0.	0.	^
Director	1.00	X	-	-	-	╁╌		0.	U .	0.
(9) Brian Alegria	1.00	X	ĺ				ĺ	0.	0.	0.
Vice-Chairman	1.00	^	-	├─	\vdash	╁╴	-		<u> </u>	·
(10) Hans van Someren Greve	1.00	X						0.	0.	0.
Director (11) Jack Toevs	1.00	1	┢	\vdash	t	\vdash			<u>.</u>	<u>_</u>
Director	1.00	X		ĺ				0.	0.	0.
(12) La Verne Bergstrom					I^-			† -		`
Director	1.00	X]		}]	0.	0.	0.
(13) Mark Griggs			t					T		
Director	1.00	X	ļ		1	ļ		0.	0.	0.
(14) Miles Kohl					1					
Director	1.00	X	İ					0.	0.	0.
(15) Peter Van Well					Π					
Director	1.00	X				\perp		0.	0.	0.
(16) Roger Strand] _]]
Director	1.00	X	<u> </u>	L	_	ota	_	0.	0.	0.
(17) Ron Gonsalves		1	ŀ	1	1					
Director	1.00	X		上	L.	上	ļ	0.	0.	0. Form 990 (2011)

Form 990 (2011)

Pai	rt VII	II Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ants	1 a	· • • •	1a 1b		1		
Contributions, Gifts, Grants and Other Similar Amounts	b	· _ · · · · · · · · · · · · · · · · · ·	40 540				ļ
	C	T					
<u> </u>	d	· · · · · · · · · · · · · · · · · · ·	1d				į
Sign	9	• · · · · · · · · · · · · · · · · · · ·	1e)
ther	f		11 455,876.				
물리		<u>-</u>	11 433,070.				
52	-	Noncash contributions included in lines 1a-1f \$		504,394.			ļ
5 (8)	n	Total. Add lines 1a-1f	Business Code	204,324.			
	۰.						
Ş	2 a		i .				
Program Service Revenue	b						
E 9	0		1 1		 		
200	d						
<u>۾</u>	6	All other program service revenue					
}		Total. Add lines 2a-2f	•				
	3	Investment income (including dividend	s, interest, and				
	-	other similar amounts)	▶	226,383.	226,383.		
	4	Income from investment of tax-exempt	bond proceeds				
1	5	Royalties	•				
1		(i) R	eal (II) Personal				
)	6 a	Gross rents					
l	b	Less, rental expenses					
ł	c	Rental income or (loss)					
İ	c	Net rental income or (loss)					
	7 a	a Gross amount from sales of (i) Secu	urities (ii) Other				
ł		assets other than inventory			1		
	t	Less: cost or other basis					
		and sales expenses			i		
ł	•	Gain or (loss)]		
	•	d Net gain or (loss)					
9	8 a	a Gross income from fundraising events					
Other Revenue		including \$ 48,518. o	f		1		ł
ě		contributions reported on line 1c). See	0.4500				
<u></u>		Part IV, line 18	a 214509.				
퉏		b Less, direct expenses	ь 43,141.	454 260	}		4.74 0.60
_		c Net income or (loss) from fundraising e		171,368.	<u> </u>		171,368.
	9 a	a Gross income from gaming activities. S			1		
		Part IV, line 19	a 41,122.				
		b Less: direct expenses	ь 22,611.	10 511	10 511		
		Net income or (loss) from gaming activ	rties	18,511.	18,511.		
	10 8	a Gross sales of inventory, less returns and allowances	a 881.		!		
	١.		a 881. b 4,077.				
	l .	b Less: cost of goods sold		<3,196.		<3,196.	
	 '	 Net income or (loss) from sales of inveiting Miscellaneous Revenue 	Business Code	<3,130.	 	<u> </u>	· /
	11 :		Busilless Code				
	l .	a b			 		
		c			 		1
	`	d All other revenue					
		e Total. Add lines 11a-11d	<u> </u>				
	12	Total revenue. See instructions.		917,460.	244,894.	<3.196	>171.368.
1320 01-23	09						Form 990 (2011)

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).

Do n	Check if Schedule O contains a response to include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	198,665.	198,665.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	508,731.	508,731.		
3	Grants and other assistance to governments,	Ì			
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				·
5	Compensation of current officers, directors,				
	trustees, and key employees	78,597.	31,439.	23,579.	23,579.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	43,393.	21,238.	7,587.	14,568.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	12,284.	5,282.	3,194.	3,808.
10	Payroll taxes	10,794.	4,642.	2,806.	3,346.
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	18,276.		18,276.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	9,730.	8,628.	1,102.	
9	Other				
12	Advertising and promotion	7,414.	7,414.		
13	Office expenses	3,436.	1,256.	1,115.	1,065
14	Information technology				
15	Royalties				
16	Occupancy	22,345.	9,608.	5,810.	6,927
17	Travel	3,921.	1,686.	1,020.	1,215
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,117.			
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	- Paris de de la la la la la la la la la la la la la	11,736.	5,046.	3,052.	3,638
b	Development	8,581.	3,726.		4,855
C	Professional Developmen	4,316.		4,316.	
d	Miscellaneous	2,810.		2,810.	
е		1,855.		1,855.	
25	Total functional expenses. Add lines 1 through 24e	951,001.	807,361.	76,522.	63,001
26	Joint costs. Complete this line only if the organization	-			
	reported in column (B) joint costs from a combined	İ			
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)	1			

	Form	990	(201)	1)
--	------	-----	-------	----

Part X Balance Sheet							
				(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing			1		
	2	Savings and temporary cash investments	ļ	1,065,848.	2	<u>853,343.</u>	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	8,956.	4	25,287.		
	5	Receivables from current and former officers, di	rectors, trustees, key				
		employees, and highest compensated employee	es. Complete Part II				
		of Schedule L			5		
	6	Receivables from other disqualified persons (as	defined under section				
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing				
		employers and sponsoring organizations of sec	ion 501(c)(9) voluntary				
Assets		employees' beneficiary organizations (see instru	ctions)		6		
	7	Notes and loans receivable, net		2,187,982.	7	2,176,802.	
Ass	8	Inventories for sale or use		7,451.	8	4,713.	
7	9	Prepaid expenses and deferred charges		3,151.	9	<u>5,305.</u>	
	10a	Land, buildings, and equipment: cost or other]])		
		basis. Complete Part VI of Schedule D	10a 26,947.				
	b	Less: accumulated depreciation	10b 15,413.	10,034.	10c	<u>11,534.</u>	
	11	Investments - publicly traded securities		1,087,721.	11	1,234,300.	
	12	Investments - other securities. See Part IV, line	l1		12		
	13	Investments - program-related. See Part IV, line	11		13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		<u>172,556.</u>	15	171,287.	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	4,543,699.	16	4,482,571.	
	17	Accounts payable and accrued expenses		225,872.	17	287,978.	
	18	Grants payable			18		
	19	Deferred revenue		8,370.	19	6,050.	
	20	Tax-exempt bond liabilities			20		
8	21	Escrow or custodial account liability. Complete			21		
Liabilities	22	Payables to current and former officers, directo)]		
ia Ta		highest compensated employees, and disqualif	ed persons. Complete Part II		_		
_		of Schedule L			22		
	23	Secured mortgages and notes payable to unrel			23		
	24	Unsecured notes and loans payable to unrelate		<u></u>	24		
	25	Other liabilities (including federal income tax, pa					
	1	parties, and other liabilities not included on lines	17-24) Complete Fall X Of		25		
	na	Schedule D		234,242.	25 26	294,028.	
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check h	ere X and complete	434,244.	20	274,020.	
ø.		lines 27 through 29, and lines 33 and 34.	and complete		1		
ğ	27	Unrestricted net assets	284,933.	27	263,317.		
alan	28	Temporarily restricted net assets	1,698,267.	28	1,586,269.		
Ä	29	Permanently restricted net assets	2,326,257.		2,338,957.		
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, or		~			
<u> </u>]	complete lines 30 through 34.]]			
ŧ	30	Capital stock or trust principal, or current funds		30			
SSe	31	Paid-in or capital surplus, or land, building, or e		31			
Ž.	32	Retained earnings, endowment, accumulated in			32		
ž	33	Total net assets or fund balances	.,	4,309,457.		4,188,543.	
	34	Total liabilities and net assets/fund balances		4,543,699.		4,482,571.	

Form	990 (2011)	Washington Apple Education Foundation	<u>91-16388</u>	<u>90</u>	Pag	₁₀ 12
Pa	t XI Reconciliat	on of Net Assets				
	Check if Sched	ule O contains a response to any question in this Part XI				X
1	Total revenue (must s	gual Part VIII, column (A), line 12)	1	917	. 4	60.
2	•	equal Part IX, column (A), line 25)				01.
3		es. Subtract line 2 from line 1				41.
4	•	es. Subtract line 2 from line 1 Ilances at beginning of year (must equal Part X, line 33, column (A))				57.
5		assets or fund balances (explain in Schedule O)				73.
6	~	lances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))				43.
		tatements and Reporting	_0 -21	100	,,,	= -
		ule O contains a response to any question in this Part XII				\mathbf{x}
	Check ii Sched	ule O contains a response to any question in this Fait Air			Yes	No
1	Accounting method u	ised to prepare the Form 990: Cash X Accrual Other	Γ	\dashv	-	
	_	anged its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	=	n's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization	n's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2	b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
		n of its financial statements and selection of an independent accountant?		2c	X	
		anged either its oversight process or selection process during the tax year, explain in Sch	edule O.	\Box		
d	-	b, check a box below to indicate whether the financial statements for the year were issue		i		l
		blidated basis, or both:		1		
	X Separate basis	Consolidated basis Both consolidated and separate basis		l		l
За	As a result of a federa	al award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			ĺ
	Act and OMB Circula	r A-133?	Ĺ	3a		X
b	If "Yes," did the organ	nization undergo the required audit or audits? If the organization did not undergo the requ	ired audıt	T		
		n Schedule O and describe any steps taken to undergo such audits.		3b		
			F	orm §	90 (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2011

Open to Public inspection

Name of the organization

Department of the Treasury Internal Revenue Service

Employer identification number

	•	Washing	ton Apple Ed	ucati	on Fo	undat	ion		91	-1638	890	
Part I	Reason f		ty Status (All organiz					ructions.				
he organi	zation is not a	private foundation b	pecause it is. (For lines 1	through 1	1, check c	only one b	ox)					
1 🔲	A church, cor	nvention of churches	, or association of churc	ches descr	ibed in se	ction 170((b)(1)(A)(i)					
2	A school desc	cribed in section 170	0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🗔	A hospital or a	a cooperative hospit	al service organization o	described (n section	170(b)(1)(A)(iii).					
4	A medical res	earch organization o	perated in conjunction	with a hosi	ortal descr	ibed in se	ction 170	(b)(1)(A)(ii	i). Enter th	e hospital	's name	θ,
	city, and state	ə:										
5 🔲	An organization	on operated for the l	penefit of a college or ur	niversity ov	vned or op	erated by	a govern	mental unr	t describe	d in		
	section 170((b)(1)(A)(iv). (Comple	te Part II)									
6 🔲	A federal, stat	te, or local governme	ent or governmental und	t described	l in section	n 170(b)(1)(Α)(ν).					
7 X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
	section 170(b)(1)(A)(vi). (Complete Part II)											
8 🗀	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9 🔲	An organization	on that normally rece	eives: (1) more than 33 ¹	1/3% of its	support fr	om contri	butions, rr	nembershij	p fees, and	d gross red	ceipts f	rom
	activities relat	ted to its exempt fur	ctions - subject to certa	un exceptio	ons, and (2	?) no more	than 33 1	1/3% of its	support f	rom gross	ınvestr	ment
	income and u	inrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	inization a	fter June 3	0, 197	5
	See section !	509(a)(2). (Complete	Part III.)									
10 🛄	An organization	on organized and op	erated exclusively to te	st for publi	c safety. S	ee sectio	n 509(a)(4	4) .				
11	An organization	on organized and op	erated exclusively for th	ne benefit d	of, to perfo	rm the fur	nctions of,	or to carr	y out the p	ourposes c	of one o	or
	more publicly	supported organiza	tions described in secti	on 509(a)(1) or sectio	n 509(a)(2) See se c	ction 509(a)(3). Chec	ck the box	that	
			organization and compl		_							
	a Type I		* *	турі						Type III - 0		
e	-	•	t the organization is not									ח
		_	nan one or more publicly		-				9(a)(1) or s	ection 509	(a)(2).	
f	If the organization	ation received a writ	ten determination from t	the IRS tha	it it is a Ty	pe I, Type	II, or Type	ə III				$\overline{}$
		rganization, check th							_			
g	•		rganization accepted ar			-						
	••		rectly controls, either al	one or tog	ether with	persons o	lescribed	in (ii) and ((ii) below,		Yes	No
	_		spported organization?							11g(i)	} -}	
		-	described in (i) above?		_					11g(ii)	TT	
_	• •	-	person described in (i)							11g(iii)		
ħ	Provide the fo	ollowing information	about the supported or	ganization	(S).							
		Γ	(iii) Type of	ki) 45.0.0		(v.) Dud von		(vi) Is	the			
	of supported	(ii) EIN	organization		rganization sted in your			organization	on in col.		nount of	†
orga	anization		(described on lines 1-9		document?			(i) organiz U.S		Sup	port	
			above or IRC section (see instructions))	1	No	Yes	No	Yes	No			
			(-0.1	 			-	1	1			
							<u> </u>	1				
				1	Ì]	1				
				-								
Total		I	1	1	l .	l .	1	1	1			

Form 990 or 990-EZ.

132021 01-24-12

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990 EZ) 2011 Washington Apple Education Foundation 91-1638890 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	·					
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	į					
	include any "unusual grants.")	293,807.	316,533.	600,964.	753,146.	504,394.	2,468,844,
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						Ti.
	or expended on its behalf				<u> </u>		
3	The value of services or facilities		·				
	furnished by a governmental unit to						
	the organization without charge]			_		
4	Total. Add lines 1 through 3	293,807.	316,533.	600,964.	753,146.	504,394.	2,468,844,
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly	1					
	supported organization) included						
	on line 1 that exceeds 2% of the	[
	amount shown on line 11,						
	column (f)						24,813.
6	Public support. Subtract line 5 from line 4						2 444 031.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	293,807.		600,964.	753,146.	504,394.	2,468,844.
8	Gross income from interest,						
	dividends, payments received on	}					
	securities loans, rents, royalties			Ti			
	and income from similar sources	304,445.	238,340.	222,114.	219,658.	226,383.	1,210,940,
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on				1		
10	Other income Do not include gain						
	or loss from the sale of capital	!			j		
	assets (Explain in Part IV.)	,					
11	Total support. Add lines 7 through 10						3,679,784.
12		, etc. (see instructi	ons)			12 1	,055,147.
13				d, fourth, or fifth ta	ax year as a sectio		
	organization, check this box and sto	p here					
Se	ction C. Computation of Pub	lic Support Pe	rcentage				
14	Public support percentage for 2011 ((line 6, column (f) d	ivided by line 11, o	column (f))		14	66.42 %
15	Public support percentage from 2010	0 Schedule A, Part	II, line 14			15	66.51 %
16a	33 1/3% support test - 2011. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			▶ [X]
t	33 1/3% support test - 2010. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check t	his box
	and stop here. The organization qua						▶□
178	10% -facts-and-circumstances tes	st - 2011. If the org	anization did not	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	nces" test, check t	his box and stop I	nere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances'					•	▶□
t	10% -facts-and-circumstances tes	-	•		_	17a, and line 15 is	10% or
•	more, and if the organization meets t						
	organization meets the "facts-and-cir				•		ightharpoons
18	Private foundation. If the organization						ns D
						edule A (Form 900	

Schedule A (Form 990 or 990-EZ) 2011 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the or	rganization failed to qualify under Part II. If the organization fails to
--	---

Section A. Public Support	OW, please comp	DIOTO 1 LETT 11.7				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and						
3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6) 1 Section B. Total Support		<u> </u>				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	147 200.	19/2333	19/255	107-3-1	107-01	107.51
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975					ļ	
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12) L 14 First five years. If the Form 990 is for	the organization	's first second the	rd, fourth, or fifth t	lax vear as a secti	on 501(c)(3) or	ganization.
check this box and stop here						<u> </u>
Section C. Computation of Publi	c Support Pe	ercentage				
15 Public support percentage for 2011 (III			column (f))		15	%
16 Public support percentage from 2010			 		16	%
Section D. Computation of Inves					T., T	
17 Investment income percentage for 2018 Investment income percentage from 2			ne 13, column (f))		18	
18 Investment income percentage from 2 19a 33 1/3% support tests - 2011. If the			on line 14 and lin	a 15 is more than		
more than 33 1/3%, check this box ar	_					▶
b 33 1/3% support tests - 2010. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is m	nore than 33 1	. (
line 18 is not more than 33 1/3%, chec 20 Private foundation. If the organization		• -			-	ation
Fire touridation, it the organization	- GIO TIOL OFFICER &		, or 100, or ock		bedde A /Fee	

15

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

_	Washington Apple E	<u>aucation</u>	on roundation	d 4		<u>-16388</u>		
Par			or Other Similar Fun	us or A	ccounts. (omplete if the	he	
	organization answered "Yes" to Form 990, Part IV, lin							
		(a) D	onor advised funds	(b) Funds and	other accou	nts	
1	Total number at end of year		<u></u>	<u> </u>				
2	Aggregate contributions to (during year)			ļ				
3	Aggregate grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in	writing that th	he assets held in donor ad	vised fun	ds			
	are the organization's property, subject to the organization's	s exclusive leç	gal control?		[Yes	No	
6	Did the organization inform all grantees, donors, and donor a			be used o	only			
	for charitable purposes and not for the benefit of the donor of							
	impermissible private benefit?				[Yes	☐ No	
Par	t II Conservation Easements. Complete if the or	rganization an	swered "Yes" to Form 990	, Part IV,	line 7.			
1	Purpose(s) of conservation easements held by the organizat	tion (check all	I that apply)					
	Preservation of land for public use (e.g., recreation or		Preservation of an	historical	ly important la	ınd area		
	Protection of natural habitat	·	Preservation of a c	ertified hi	storic structui	re		
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a quali	fied conserva	ation contribution in the for	m of a co	nservation ea	sement on t	he last	
_	day of the tax year.							
					Held at	the End of th	e Tax Year	
а	Total number of conservation easements				2a			
b	Total acreage restricted by conservation easements				2b			
c	Number of conservation easements on a certified historic sti	ructure includ	ded in (a)		2c			
	Number of conservation easements included in (c) acquired		• •	cture				
_	listed in the National Register				2d			
3	Number of conservation easements modified, transferred, re	eleased. extin	quished, or terminated by	the organ		the tax		
•	year >	5,040 04 , 5,44	900	., u.gu.				
4	Number of states where property subject to conservation ea	asement is lo	cated >					
5	Does the organization have a written policy regarding the pe			– of				
Ŭ	violations, and enforcement of the conservation easements	_	mig, mopeonom, manamig	•	ſ	Yes	□ No	
6	Staff and volunteer hours devoted to monitoring, inspecting		no conservation easements	s dunna t	he vear 🟲		110	
7	Amount of expenses incurred in monitoring, inspecting, and							
8	Does each conservation easement reported on line 2(d) abo						-	
Ū	and section 170(h)(4)(B)(ii)?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, roquirornamo er cosion ,	, = (, , , (, , , ,	1	Yes	□ No	
9	In Part XIV, describe how the organization reports conservat	ition easemen	its in its revenue and exper	nse statei	ment and hal			
9	include, if applicable, the text of the footnote to the organiza							
	conservation easements.	ation 3 interior	a statoments that describ	00 1110 015	janication 5 a	Joodinang 10	•	
Pa	rt III Organizations Maintaining Collections of	of Art. Hist	torical Treasures, or	Other	Similar As	sets.		
<u> </u>	Complete if the organization answered "Yes" to Form	•	•					
12	If the organization elected, as permitted under SFAS 116 (A			tement a	nd balance sh	eet works of	f art	
,,,	historical treasures, or other similar assets held for public ex	-						
	the text of the footnote to its financial statements that descri			3141100 01	public del vice	,, provido, iii	11 (21)	
b	If the organization elected, as permitted under SFAS 116 (A			ent and h	alance sheet	works of art	historical	
D	treasures, or other similar assets held for public exhibition, e	•	·					
		subcation, or	1656alCit ill lultilelalice of	Public 36	vice, provide	III OIIOWIII	y amounts	
	relating to these items.				• •			
	(i) Revenues included in Form 990, Part VIII, line 1				~ 3			
_	(ii) Assets included in Form 990, Part X		than amular access for fire					
2	If the organization received or held works of art, historical tre			ciai gain,	broviae			
	the following amounts required to be reported under SFAS	116 (ASC 958	b) relating to these items:		. .			
a	Revenues included in Form 990, Part VIII, line 1				5 —	· 		
b	Assets included in Form 990, Part X	•			\$			

		ton Apple					<u>163889</u>	
Par								
	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that	are a signi	ficant use	of its collection	n items
	(check all that apply):							
а	Public exhibition	d	_	hange prograi	ms			
b	Scholarly research	е	Other					
С	Preservation for future generations							
	Provide a description of the organization's co						in Part XIV	
	During the year, did the organization solicit or				r sımılar as	sets		
	to be sold to raise funds rather than to be ma						Yes	No_
Par	reported an amount on Form 990, Par	•	ete if the organizatio	n answered "	Yes" to Fo	rm 990, Pa	art IV, line 9, or	•
1a	Is the organization an agent, trustee, custodi		liary for contribution	s or other ass	sets not inc	luded		
	on Form 990, Part X?		•				Yes	☐ No
	If "Yes," explain the arrangement in Part XIV	and complete the fo	flowing table:					
_							Amoun	nt .
С	Beginning balance					1c		
	Additions during the year					1d		
	Distributions during the year					1e		
	Ending balance					1f		
	Did the organization include an amount on Fe	orm 990, Part X, line	21?				Yes	□ No
	If "Yes," explain the arrangement in Part XIV							
Par			swered "Yes" to Fo	rm 990, Part I	V, line 10			
		(a) Current year	(b) Prior year	(c) Two years	s back (d)	Three year	s back (e) Fou	r years back
1a	Beginning of year balance	19,223,	14,971,					
b	Contributions	2,100,	2,550,					
C	Net investment earnings, gains, and losses	<736.						
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs		,	į	ľ			
f	Administrative expenses			L				
g	End of year balance	20,587,	19,223,					
2	Provide the estimated percentage of the curr		e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment	•	%					
b	Permanent endowment	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.						
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held a	ınd admınıstei	red for the	organizati	ion	
	by.							Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?				3b	
4	Describe in Part XIV the intended uses of the	e organization's endo	owment funds.					
Par	t VI Land, Buildings, and Equipm	nent. See Form 990), Part X, line 10.	·				
	Description of property	(a) Cost or o		or other	(c) Acci	umulated	(d) Boo	k value
	·	basis (investr	ment) basis	(other)	depre	ciation		
1a	Land							
b	Buildings							
C	Leasehold improvements							
d	Equipment		2	6,947.	1	<u>.5,413</u>	3. 1	1,534.
е_	Other							
Total	. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	X column (B) line 1	10(c))		•	▶ 1	1.534.

Part VII Investments - Other Securities.	Apple Educat See Form 990, Part X, line	12	<u>.</u>	
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of value st or end-of-year ma	
) Financial derivatives				
Closely-held equity interests				
3) Other				
(A)				
(B)		- 		
(C) (D)				
(E)				
(F)	 			
(G)				
(H)				
(1)				
otal. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, lin	9 13		
(a) Description of investment type	(b) Book value	Co	(c) Method of valuest or end-of-year ma	
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, lii				
	a) Description			(b) Book value
(1)				
(2)				
(3)				<u> </u>
(4)				
(5)				
(6)				ļ.——.
(7)				
(8)				
(9)				
(10) Fotal. (Column (b) must equal Form 990, Part X, col (B) l	ine 15 i			
Part X Other Liabilities. See Form 990, Part				
1. (a) Description of liability		(b) Book value]	
(1) Federal income taxes]	
(2)				
(3)]	
(4)			_	
(5)			4	
(6)			4	
(7)		···	-	
(8)			_	
(9)			-	
(10)			-[
(11)	h 05)		-{	
Total. (Column (b) must equal Form 990, Part X, col (B) I FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnot FIN 48 (ASC 740)	line 25.) le to the organization's financial st	atements that reports the organ	L nization's liability for uncert	ain tax positions under
2 FIN 48 (ASC 740)		······································		hedule D (Form 990) 20

		(Form 990) 2011	Washington	Apple E	ducation	Foun	dation		<u>91-1</u>	638890	Page 4
Par	<u>t XI</u>	Reconciliation of	f Change in Net	Assets from	Form 990 to	<u>Audite</u>	d Financia	il State	ments		
1	Total	revenue (Form 990, Par	t VIII, column (A), line	12)			<u> </u>	1			460.
2	Total	expenses (Form 990, Pa	art IX, column (A), line	25)			-	2			001.
3	Exces	ss or (deficit) for the yea	r Subtract line 2 from	i line 1			 - 	3			<u>,541.</u> >
4	Net u	nrealized gains (losses)	on investments				⊢	3		<u> <87</u>	<u>,373.</u> >
5	Dona	ted services and use of	facilities					5			
6		tment expenses					_	3			
		period adjustments						7			
		(Describe in Part XIV)						3 -		0.7	
		adjustments (net) Add					<u> </u>	9			<u>.373.</u> >
		ss or (deficit) for the year Reconciliation or						o e ner R	eturn	<120	<u>,914.</u> >
1		revenue, gains, and oth				7710		<u> </u>	1	900	,786.
2		ints included on line 1 b			Herita						, 100.
		inrealized gains on inves	· ·	rait viii, iiite 12		2a	<87	373.			
_		ted services and use of				2b		870.			
b		veries of prior year gran				2c		070.	, j		
_			15			2d					
d		r (Describe in Part XIV.)				20			2e	-86	,503.
		ines 2a through 2d ract line 2e from line 1							3		,289.
3		unts included on Form 9	100 Bost VIII boo 12	hut not on line 4:				!	-	307	, 20).
4		tment expenses not inc				4a					
a		r (Describe in Part XIV.)	iuded on Form 990, r	art viii, iiii o 70		4b	-69	,829.			
þ		ines 4a and 4b				40 1		, 023.		-69	,829.
		revenue Add lines 3 an	nd 4a. (This must saw	ol Form 000 Port	I line 12 \				4c		460.
5 Par		Reconciliation o				ents W	ith Expens	es per	Retur		, 400.
1		expenses and losses p							1	1,021	700.
2		unts included on line 1 b								2/022	7.000
a		ited services and use of	•	art ist, mid co		2a		870.	1 1		
b		year adjustments	Taomitios			2b		0,0,			
c		r losses				2c					
ď		r (Describe in Part XIV)				2d					
e		lines 2a through 2d							2e		870.
3		ract line 2e from line 1							3	1,020	
4		unts included on Form 9	990. Part IX. line 25. b	ut not on line 1:							7000
a		stment expenses not inc	•			4a					
b		r (Describe in Part XIV)		2,		46	<69	,829.			
		lines 4a and 4b							4c	<69	,829.
5	Total	expenses Add lines 3	and 4c. (This must ea	ual Form 990. Pa	art I, line 18)				5		,001.
Par		/ Supplemental In									
Com	olete t	his part to provide the c	descriptions required	for Part II, lines 3	, 5, and 9, Part III	, lines 1a	and 4, Part I	V, lines 1	b and 2b	, Part V, line	4, Part
		art XI, line 8, Part XII, line	•								
Par	rt I	K, Line 2: T	<u>he Foundati</u>	on opera	tes as a	tax	exempt	orga	niza	tion	
	_			•		_					
unc	ier	Section 501	(c)(3) of t	he Inter	nal Rever	nue C	ode; t	nerei	ore,	<u>no</u>	
pro	vis	sion for Fed	eral income	tax is	presented	i. Th	e Found	datio	n ha	s also	
bee	en o	classified a	s a publicl	y suppor	ted organ	nizat	ion und	der S	ecti	ons	
509)(a)(1) and 170	(b)(1)(A)(t	of th	e Interna	al Re	evenue (Code.			
The	e Fo	oundation re	ceives cert	ain reve	nues that	t are	consi	dered	unr	<u>elated</u>	
bus	sine	ess taxable	income. For	the yea	rs ended	Dece	ember 3	1, 20	11 a	nd 201	0,
the	e Fo	oundation re	cognized no	income	tax relat	ted t	o unre	lated			
									Schedu	le D (Form 9	90) 2011

Schedule D (Form 990) 2011 Washington Apple Education Foundation 91-1638890 Page 5 Part XIV Supplemental Information (continued)
income.
The Foundation has adopted the provisions of FASB ASC 740-10. Management
has evaluated the FoundationOs tax positions and concluded the Foundation
has taken no uncertain tax positions requiring adjustment to the financial
statements to comply with these provisions. With few exceptions, the
Foundation is no longer subject to income tax examinations by U.S. Federal
tax authorities for the years before 2008.
Part XII, Line 4b - Other Adjustments:
Direct Costs of Fundraisers -68,490.
Cost of Goods Sold -1,339.
Total to Schedule D, Part XII, Line 4b -69,829.
Part XIII, Line 4b - Other Adjustments:
Direct Costs of Fundraisers -68,490.
Cost of Goods Sold -1,339.
Total to Schedule D, Part XIII, Line 4b -69,829.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2011

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Open To Public Inspection

ame of the organization				a	1	er identification numbe
Proceedings to to on A catestate a	con Apple Educatio			. — — — —		638890
Part I required to complete this part.	Complete if the organization answer.	erea "Y	95° tC) Form 990, Paπ IV, I	ne 17 Form 9	190-EZ filers are not
1 Indicate whether the organization raise		no activ	rities.	Check all that apply.		
a Mail solicitations				overnment grants		
b Internet and email solicitations			-	nment grants		
c Phone solicitations	g Special		-	-		
d In-person solicitations	g openia.		g \	3.0		
2 a Did the organization have a written or	r oral agreement with any individual	linchie	tina oi	fficers directors trus	stees or	
key employees listed in Form 990, Pa	- · · · · · · · · · · · · · · · · · · ·		-			Yes No
b If "Yes," list the ten highest paid indiv	· · · · · · · · · · · · · · · · · · ·			_		
compensated at least \$5,000 by the		Jun 10	, ag. o	omenie eneer winen	trio randialos.	10 10 00
(i) Name and address of individual		(iii) fundr	Did	(iv) Gross receipts	(v) Amount p	
or entity (fundraiser)	(ii) Activity	have con	ustody	from activity	fundraise	in (or rerained b)
or ormit, (carrotation)			utions?	, , , , , , , , , , , , , , , , , , , ,	listed in col	l. (i) organization
		Yes	No			
				_		
			Ĺ			
			}			1
		<u> </u>	L			
		<u> </u>	ļ	<u> </u>	<u></u>	
		}	}			ŀ
		↓ —	ļ			
		 	<u> </u>			
				}	,	
		 		 		
			[
		Ь	L			
P-A-4						
Total 3 List all states in which the organization	n is registered or licensed to colicit	contrib	Nution:	or has been notified	d it is exempt	from registration
or licensing.	It is registered of licerised to solicit	COILLI	Julion	5 OI 1185 DEE11 HOUNE	J It is exempt	Irom registration
						-
	·····					
						
				<u> </u>		

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

Schedule G (Form 990 or 990-EZ) 2011

Schedule G (Form 990 or 990-EZ) 2011 Washington Apple Education Foundation Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 Part II of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through 2 Golf Auction col (c)) (total number) (event type) (event type) Revenue 151,836 40,137. 71,054 263,027. Gross receipts 10,603 37,915 0 48,518. 2 Less: Charitable contributions 141,233 2,222 71,054 214,509. Gross income (line 1 minus line 2) 0 0 0 4 Cash prizes 6,670. 0. 0 6,670. Noncash prizes Direct Expenses 14,384 0. 1,214 15,598. Rent/facility costs 0. 8,538 20,873. 12,335 Food and beverages 0. 0 Entertainment 0 Other direct expenses 43,141; 10 Direct expense summary. Add lines 4 through 9 in column (d) 171,368. Net income summary Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col. (c)) 41,122. 41,122. Gross revenue 2 Cash prizes Direct Expenses 21,785. 21,785. Noncash prizes Rent/facility costs 826 826. Other direct expenses % Yes Yes Yes X No Volunteer labor No 22,611; 7 Direct expense summary. Add lines 2 through 5 in column (d) 18,511. 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: WA X Yes a is the organization licensed to operate gaming activities in each of these states? b If "No," explain: Yes X No 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b if "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2011

<u>Sch</u>	edule G (Form 990 or 990-EZ) 2011 Washington Apple Education Foundation 91-1	<u> 1638890</u>	Page 3
	Does the organization operate gaming activities with nonmembers?	X Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	└── Yes	X No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility	13a	%
	An outside facility	136 100	0.00 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ▶ Jennifer Witherbee	 	
	Address ► 2900 Euclid Avenue - Wenatchee, WA 98801		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	X No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
c	: If "Yes," enter name and address of the third party		
	Name >		
	Address >		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
			
	Director/officer Employee Independent contractor		
	Mandatory distributions:		
ā	s is the organization required under state law to make charitable distributions from the gaming proceeds to	<u></u>	
	retain the state gaming license?	L Yes	X No
t	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
De	organization's own exempt activities during the tax year \$ art IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii)) and (v) and	l Port III
Fe	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information.		
	intes 5, 50, 100, 150, 150, 16, and 170, as applicable 7550 complete this part to provide any assumental information	11 (300 113110	Ctions
100	DB3 01-23-12 Schedule G (Form	m 990 ar 99	3-F7\ 2011
1320	083 01-23-12 Schedule G (Form	300 01 30	

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. Department of the Treasury Internal Revenue Service SCHEDULE I (Form 990)

2011	Inspection
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2 2

Schedule I (Form 990) (2011) နိ [] Employer identification number 91-1638890 (h) Purpose of grant or scholarships and or scholarships and or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any esearch esearch recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed and address of organization (b) EIN (c) IRC section (d) Amount of non-cash (f) Method of valuation (book, non-cash assistance other) 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 selection 0.Book Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 77,137 105,706 Washington Apple Education Foundation Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(c)(3) 501(c)(3) Enter total number of other organizations listed in the line 1 table 91-1075542 23-7319272 General Information on Grants and Assistance critena used to award the grants or assistance? 1 (a) Name and address of organization 1300 5th Street, Suite 1060 Washington State University Wenatchee Valley College Wenatchee, WA 98801 Wenatchee WA 98801 Name of the organization 1300 5th Street Part Part

Page 2 91-1638890 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Washington Apple Education Foundation Schedule I (Form 990) (2011)

Part III

12

				Cottonian to be when the	A Decomption of non-cash assistance
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	cash assistance	(book, FMV, appraisal, other)	
Scholarships are used by students raised in tree fruit growing regions of Washington, Idaho and Dregon. Scholarships may be used for books, tuition & food, room & board. Each scholarship is	 	482,374,	0	Воок	
Part IV Supplemental Information. Complete this part to provide the	ide the information	n required in Part I,	line 2, and any other	information required in Part I, line 2, and any other additional information.	
Schedule I, Part I, Line 2: Grant rec	recipien	ipients are red	required to provide	rovide a	
report back to the grant committee identifying how funds were	e identif	ying how 1		spent and if	
the organization achieved the goals	44	ich the gr	or which the grants were received.	received.	

Part III, Column (a):

(a) Type of Grant or Assistance: Scholarships are used by students

raised in tree fruit growing regions of Washington, Idaho and Oregon.

Each

room & board.

tuition & food,

scholarship is allocated equally amongst the scholastic terms of the Scholarships may be used for books,

Schedule I (Form 990) (2011)

132102 01-27-12

Schedule I	(Form 990) 2011	Washington ormation	Apple	Education	Foundation	91-1638890	Page 2
award	year.						
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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 ▶ Attach to Form 990 or 990-EZ. Internal Revenue Service **Employer identification number** Name of the organization Washington Apple Education Foundation 91-1638890 Form 990, Part I, Line 1, Description of Organization Mission: excellence and promotes awareness of the value of Washington's tree fruit industry. Form 990, Part VI, Section B, line 11: A copy of the Form 990 was provided to the board of directors during its meeting occurring in May of 2012. Form 990, Part VI, Section B, Line 12c: The Foundation has a policy that all conflicts of interest are to be brought to the attention of the Board of Directors whenever they occur. Form 990, Part VI, Section B, Line 15a: The Executive Committee of the Washington Apple Education Foundation, each independent, performs an annual review of the executive director including: a discussion of goals from the prior year, establishment of goals for the coming year, and a review of salaries from comparable organizations. The Executive Committee determines annually a recommendation to present to the board of directors of any salary adjustments. Form 990, Part VI, Section C, Line 19: The Foundation makes its governing documents and financial statements available on it's website and their conflict of interest policy is available upon request. Form 990, Part XI, line 5, Changes in Net Assets:

Net unrealized losses on investments:

-87.373.

Schedule O (Form 990 or 990 EZ) (2011)	Page 2
Name of the organization Washington Apple Education Foundation	Employer identification number 91-1638890
Form 990, Part XII, Line 2c	
The Foundation has an audit committee that assumes respon	sibility for
oversight of the audit of its financial statements. The	audit
committee is charged with recommending an independent acc	
however, the board of directors is responsible for select	ion. The
Foundation has not changed its oversight or selection pro	cess during
the tax year.	

Internal Revenue Service

portion of the basis attributable to section 263A costs

LHA For Paperwork Reduction Act Notice, see separate instructions.

118251 11-21-11

Name(s) shown on return

Depreciation and Amortization 990 (Including Information on Listed Property)

See separate instructions.

Attach to your tax return.

Business or activity to which this form relates

OMB No 1545-0172

identifying number

Washington Apple Education Foundation Form 990 Page 10 91-1638890 Part 1 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 500,000. 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 3 2,000,000. Threshold cost of section 179 property before reduction in limitation 4 4 Reduction in limitation. Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (c) Elected cost (b) Cost (business use only) (a) Description of property 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 13 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions) Part III 17 MACRS deductions for assets placed in service in tax years beginning before 2011 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use (b) Month and year placed (d) Recovery (f) Method (a) Classification of property (e) Convention (g) Depreciation deduction only - see instructions) 1<u>9a</u> 3-year property 5-year property 7-year property 10-year property d 15-year property е 20-year property S/L 25 yrs 25-year property g 27 5 yrs. MM S/L h Residential rental property S/L 27.5 yrs MM MM S/L 39 yrs i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. S/L 12-year þ 40 yrs MM S/L 40-year Part IV | Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 4,117. 23 For assets shown above and placed in service during the current year, enter the