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Form **990-EZ**

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions.

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

OMB No 1545-1150

2011

Open to Public Inspection

Form 990-EZ

Α	For the	2011 calend	dar year, or tax year beginning $07/01/11$, and ending $06/30/$	12			
В	Check if a		D Employer id	D Employer identification number			
X	Address o		WASHINGTON ASSOCIATION FOR	, ,			
П	Name cha	•	KOREAN SCHOOLS	51-06	51-0645383		
П	Initial retu	•	Number and street (or P O box, if mail is not delivered to street address)	E Telephone n			
П	Terminate		4535 KING EDWARD CT	703-6	28-4537		
П	Amended	retum	City or town, state or country, and ZIP + 4	F Group Exe	mption		
П	Application		ANNANDALE VA 22003		Number	· •	
G		iting Method	X Cash Accrual Other (specify) ▶	H Check ▶	X if the orga	inization is not	
ŀ	Websit	•	W.WAKS.INFO	-	to attach Sched		
J	Tax-exe	-		- 27 (Form 99	90, 990-EZ, or 99	90-PF)	
K	Check !		e organization is not a section 509(a)(3) supporting organization or a section 527 organization	ganization and its	gross receipts a	re normally	
	not mo	re than \$50,0	00 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-posto	ard) may be requi	red (see instruct	ions) But if	
			oses to file a return, be sure to file a complete return				
L	Add line:	s 5b, 6c, and 7l	b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total asset	s (Part II,			
	line 25, d	column (B) belo	ow) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	53,795	
F	Part I		ue, Expenses, and Changes in Net Assets or Fund Balances	(see the instruc	tions for Part I	.)	
		Check	if the organization used Schedule O to respond to any question in this Pa	rt I		×	
	1	Contributions,	gifts, grants, and similar amounts received		1	50,647	
	2	Program ser	rvice revenue including government fees and contracts		2	3,148	
	3	Membership	dues and assessments		3		
	4	Investment i	ncome		4		
	5a	Gross amou	int from sale of assets other than inventory 5a				
	Ь	Less cost of	r other basis and sales expenses 5b				
	l c	Gain or (loss)	5c				
	6	Gaming and					
9	a	_	ne from gaming (attach Schedule G if greater than				
ē		\$15,000)	6a				
Revenue	ь	Gross incom	ne from fundraising events (not including \$ of contribu	tions			
_		from fundras	sing events reported on line 1) (attach Schedule G if the				
			gross income and contributions exceeds \$15,000) 6b				
	С		expenses from gaming and fundraising events 6c				
	ď		or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract				
		line 6c)	3		6d		
	7a	•	of inventory, less returns and allowances 7a				
	b	Less cost of	·				
	c		or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c		
	8	•	ue (describe in Schedule O)		8		
Ī	9		ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9	53,795	
2012	10		similar amounts paid (list in Schedule O)		10	766	
<u>~</u> 33	11	Benefits paid	d to or for members RECEIVED	ì	11		
	12	Salanes, oth		, ¥	12		
Expenses	13	Professional	ner compensation, and employee benefits O G	. 6	13		
per	14		rent, utilities, and maintenance	<u> </u>	14		
Ř	15		olications, postage, and shipping	1	15		
Į.	-N	= -	nses (describe in Schedule O)		16	53,861	
300	素 17	•	nses. Add lines 10 through 16	j	▶ 17	54,627	
	18		deficit) for the year (Subtract line 17 from line 9)		18	-832	
Net Assets	₽19		or fund balances at beginning of year (from line 27, column (A)) (must agree with				
Ass	10		figure reported on pnor year's return)	19	14,715		
et/	20	-	ges in net assets or fund balances (explain in Schedule O)		20	-8,946	
Z	21		or fund balances at end of year. Combine lines 18 through 20		21	4.937	

FOIII 990-EZ (2011) WANDELLING	ON MODOCIMITON TON						rage z
•	ee the instructions for Part II)						X
Check if the organizat	tion used Schedule O to respond t	o any question in this F				(5)	
22 0 1		-	(A) Beginning of year 14,3	70	22	(B)	End of year 4,822
22 Cash, savings, and investments23 Land and buildings				0	23		4,022
24 Other assets (describe in Schedule C))		3	45	24		115
25 Total assets	,		14,7	_	25		4,937
26 Total liabilities (describe in Schedul	e O)			0	26		0
27 Net assets or fund balances (line 2	•	!1)	14,7	15	27		4,937
Part III Statement of Prog	ram Service Accomplishmen	nts (see the instruction	s for Part III.)			Ex	penses
Check if the organization	tion used Schedule O to respond t	to any question in this F	Part III	X	(Re	equired t	for section
What is the organization's primary exemp	t purpose?				501	I(c)(3) a	ınd 501(c)(4)
See Schedule O					_		ns and section
Describe the organization's program serv			es,		494	\$7(a)(1)	trusts, optional
as measured by expenses in a clear and		s provided, the number of			for	others)	!
persons benefited, and other relevant info	irmation for each program title						
28 SUPPORT FOR KOREAN SCHOOLS	; AND TEACHERS						
(Osserta C). If the amount maked as foreign group	te about boro	_	r-4	28a		26,057
(Grants \$) If this amount includes foreign grant	is, check here		Щ	20a		20,037
29 IMPROVEMENT FOR KOREAN LAN	IGUAGE AND CULTURE						
					İ		
(Grants \$) If this amount includes foreign grant	ts. check here	•	пΙ	29a		13,340
30 MULTI-CULTURE AND COMMUNIC							
(Grants \$) If this amount includes foreign gran	ts, check here	•	Ш	30a		3,939
31 Other program services (describe in	•			_			
(Grants \$) If this amount includes foreign gran	ts, check here	<u> </u>	LЦ	31a		1,953
32 Total program service expenses (32		45,289
Part IV List of Officers, Director Check if the organization	ors, Trustees, and Key Employees. In used Schedule O to respond to any que	List each one even if not c uestion in this Part IV	ompensated (see t	ine in	structio	ons for F	rantiv)
		(b) Title and average	(c) Reportable	(d)	Heath be	enefits,	(e) Estimated amount of
(a) Nam	ne and address	hours per week devoted to position	compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	be	nefit plans red comp	s, and	other compensation
SEUNGMIN LEE	ANNANDALE	PRESIDENT	(ii not para, circi -0-)	GCICI	rea comp	Chauton	
4535 KING EDWARD CT	VA 22003	15.00		1		0	a
JAE SEI SHIM	CENTREVILLE	CHAIRMAN					<u></u>
6714 ROCKLEDGE PL	VA 20121	10.00	0			0	o
AE KYUNG LEE	FAIRFAX	VICE PRESIDE	T				
8810 SOUTHLEA CT	VA 22031	10.00	0			0	0
SEONJA YOON	ALEXANDRIA	TREASURER					
5328 CHIEFTAIN CIR	VA 22312	10.00	0	ļ		0	0
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DAA					-		Form 990-EZ (2011

Form	990'EZ (2011) WASHINGTON ASSOCIATION FOR 51-0645383	_	F	age 3
	rt V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any guestion in this Part V			
	modulation for Fair V / Officer in the organization about contention of the respective to the question about the contention of the respective to the content of the respective to the respective	_	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	34		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			İ
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		<u> </u>
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	_		
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	_		
39	Section 501(c)(7) organizations Enter			Ì
а	Initiation fees and capital contributions included on line 9	_		
b	Gross receipts, included on line 9, for public use of club facilities	_		ļ
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			l
	reported on any of its pnor Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912,			İ
	4955, and 4958	-		
đ	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			
	reimbursed by the organization	-		
е	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	40e		X
41	List the states with which a copy of this return is filed VA	3-62	0 4	E 27
42a	The diguinations books are mountained.	13-62	0-4	:551
	4535 KING EDWARD CT Located at ▶ ANNANDALE VA ZIP + 4 ▶ 22	2003		
	LOCATION OF PARTIES AND ADDRESS OF THE PARTIES A		Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	163	X
	If "Yes," enter the name of the foreign country	420		1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	-		
	and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U S?	42c		X
	If "Yes," enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	_		▶
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44a	L	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44b		X
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	if "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d	-	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b		X
DAA		Form 9	90-E	Z (2011

Form	1 990-EZ	(2011)	WASHINGTO	N ASSOCIAT	'ION	FOR	5	1-064538	3			P	age 4
												Yes	No
46	Did the	organiza	tion engage, directly o	r indirectly, in politica	al camp	paign activities	on behalf of or in o	pposition					
	to cand	didates for	public office? If "Yes,	" complete Schedule	C, Pa	rt I					46		X
Pa	ırt VI	Sect	ion 501(c)(3) ord	anizations and	sect	ion 4947(a)	(1) nonexemp	t charitable	trusts o	only. All sec	ction		
		501(c	c)(3) organizations a 52, and complete th	and section 4947(a	a)(1) r	nonexempt ch	iaritable trusts m	iust answer qu	estions 4	17-49b			
			k if the organization				auestion in this	Part VI					
							4					Yes	No
47		•	tion engage in lobbyin	•	sectio	n 501(h) electi	on in effect during	the tax				1.00	
	•	-	omplete Schedule C, F								47		X
48		-	on a school as describ								48	<u> </u>	X
49a	Did the	organiza	tion make any transfe	rs to an exempt non-	-chanta	ble related org	anızatıon?				49a		X
b	If "Yes	," was the	related organization a	section 527 organiz	ation?						49b		L
50	Compl	ete this ta	ble for the organization	n's five highest comp	ensate	ed employees (other than officers	, directors, truste	es and ke	у			
	employ	ees) who	each received more t	han \$100,000 of cor	npensa	ition from the o	rganization If there	e is none, enter "	None "				
			(a) Name and address	of each employee			(b) Title and average	(c) Reportable		lealth benefits,	(e) Es	timated a	mount o
			paid more than				hours per week devoted to position	compensation (Forms W-2/1099-MI	contribu (SC) benefit p	itions to employee plans, and deferred		er compe	
								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	α α	ompensation	<u> </u>		
Non	e												
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											1		
	-												
			_										
f	Total n	umber of	other employees paid	over \$100,000		12 40 140 40	> _						
51	Compl	ete this ta	ble for the organizatio	n's five highest comp	oensate	ed independent	contractors who e	ach received mo	re than				
	\$100,0	00 of com	pensation from the or	ganization If there is	s none,	enter "None "	т						
	(a)	Name and	address of each independent	contractor paid more than	\$100,000)	(b)	Type of service		(c) Co	mpensa	ition	
No	one												
				 									
d	Total r	umber of	other independent co	ntractors each receiv	ving ov	er \$100,000	•						
52	Did the	e organiza	tion complete Schedu	le A? Note All secti	on 501	(c)(3) organiza	tions and 4947(a)(1)					
			itable trusts must atta			.,,,		-,		▶ 🗓	Yes		No
Unde			, I declare that I have ex				edules and statemer	nts, and to the best	of my kno	wledge and be			
			te Declaration of prepare						J,		,	-	
				h		_	-	J 1	1031	- 013			
Sigi	n	Signi	ature of officer					Date		* 1eK		-	
Her	e	5	SEUNGMIN LE	E			PRES	IDENT					
	_	Туре	or print name and title										
		Pnnt/Type p	reparer's name		Prepare	er's signature		Da	ite	Chr. I	PTIN	ī	
Paid	,								0/04/==	Check		40555	
_	parer i		"STEVE" NOH, CPA		CD2	a DITA		1		self-employed		49780	
	• }	Firm's name		Oh & Noh,		s, PLLC	 		Firm's E	in ZU	,-14	1095	14
use	Only	Firm's addre		Georgia Av		20010				700	E 2 2		
				r Springs,				<u> </u>	Phone n	<u>. 703-</u>			
May	the IRS	aiscuss t	his return with the pre	parer snown above?	See in	structions						es	No
											Form 9	9D-F7	7 (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.

2011 Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

WASHINGTON ASSOCIATION FOR KOREAN SCHOOLS

Employer Identification number 51-0645383

_P	<u>in i</u>	Reaso	on for Public Charity	Status (All organizations	must cor	ilbiete t	ilis par	1.) 366	: 1115010	CHOIS	o				
The (orgar	nization is not a	private foundation because	it is (For lines 1 through 11, che	eck only or	e box)									
1		A church, con	vention of churches, or assoc	ciation of churches described in	section 1	70(b)(1)(<i>A</i>	۸)(i).								
2	\Box	A school desc	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	\Box	A hospital or a	cooperative hospital service organization described in section 170(b)(1)(A)(iii).												
4	П	A medical res	esearch organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,												
	_	city, and state													
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in													
		section 170(b)(1)(A)(iv). (Complete Part II)													
6	\Box	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7	X														
	لـــا	_	scribed in section 170(b)(1)(A)(vi). (Complete Part II)												
8			A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)												
9	П	-		more than 33 1/3% of its suppo		tributions	, membe	ership fe	es, and	gross					
	_	_		t functions—subject to certain e											
				unrelated business taxable inco											
		• •	-	1975 See section 509(a)(2). (
10			-	clusively to test for public safety			a)(4).								
11	П	•		clusively for the benefit of, to pe				carry out	t the						
	ш			d organizations described in sec						tion					
		509(a)(3). Ch	eck the box that describes the	e type of supporting organization	n and com	plete lines	11e thre	ough 11	า						
		a Type	I b Type II	c Type III–Functiona	ally integra	ted	d [Туре	e III–Oth	ner					
е		By checking the	his box, I certify that the orgai	nization is not controlled directly	or indirect	ly by one	or more	dısqualıl	ied per	sons					
		other than fou	indation managers and other	than one or more publicly support	orted organ	nizations d	lescribed	d in secti	on 509	(a)(1)					
		or section 509	9(a)(2)												
f		If the organiza	ation received a written deterr	mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upporting	g				_		
		organization,	check this box												
g		Since August	17, 2006, has the organization	on accepted any gift or contributi	ion from ai	ny of the									
		following pen	sons?												
		(i) A person	who directly or indirectly con	itrols, either alone or together w	ith persons	describe	d ın (ıı) a	ınd			_	Yes	No		
		(III) belov	v, the governing body of the s	supported organization?							11g(i)	┿			
		(ii) A famıly	member of a person describe	ed in (i) above?							11g(ıı	Ц			
		(iii) A 35% c	ontrolled entity of a person de	escnbed in (i) or (ii) above?							11g(ii	<u>i) </u>	<u> </u>		
h		Provide the f	ollowing information about the	e supported organization(s)	1		<u> </u>								
(e of supported	(ii) EIN	(III) Type of organization	1 ' '	organization		rou notify nization in	(vi) I organizat	s the	, ,	nount of			
	or	ganization		(described on lines 1–9 above or IRC section	1 ' '	sted in your document?	∞l (ı)	of your	(i) organı	zed in the	Sul	port			
				(see instructions))				oort?		5?					
					Yes	No	Yes	No	Yes	No					
(A)															
						 		 							
(B)					1										
·C\					+										
(C)															
(D)															
. <u> </u>					<u> </u>			<u></u>							
(E)															
_					-			 							
Tota	al														

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.)

	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 include any "unusual grants")	65,504	75,017	76,064	74,409	50,647	341,641
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	65,504	75,017	76,064	74,409	50,647	341,641
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						341,641
Sec	tion B. Total Support	-					
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	65,504	75,017	76,064	74,409	50,647	341,641
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carned on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						341,641
12	Gross receipts from related activities, etc. (see instructions)				12	3,148
13	First five years. If the Form 990 is for the o	organization's first, s	second, third, fourth	n, or fifth tax year as	s a section 501(c)(3)	_
	organization, check this box and stop here						•
Sec	tion C. Computation of Public Su	•.,•					
14	Public support percentage for 2011 (line 6,			f))		14	100.00%
15	Public support percentage from 2010 Sche					15	99.90%
16a	33 1/3% support test—2011. If the organic				/3% or more, chec	k this	⊾ 😈
	box and stop here. The organization qualifi	, , ,			00.4/00/		► X
b	33 1/3% support test—2010. If the organic				33 1/3% or more,		▶ □
470	check this box and stop here. The organiza			-	or 16b, and has 14	ia	
1/a	10%-facts-and-circumstances test—20110% or more, and if the organization meets	-					
	Part IV how the organization meets the "fac						
	organization	is-and-circumstand	es test The organ	ization qualifies as	a publicly supporte	au .	▶ □
b	10%-facts-and-circumstances test—201	If the organization	n did not chack a h	ov on line 13 16a	16h or 17a and lir	20	
b	15 is 10% or more, and if the organization r	-				ic .	
	Explain in Part IV how the organization mee				-	v	
	supported organization	no nic nacto-and-ch	Cambianoes lest	The organization qu	aamico ao a pabila	,	▶ □
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b	17a. or 17h. check t	this box and see		* L
	instructions	Groot a box off		, 0, 0.10000	and don and doe		▶ □

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Sect	tion A. Public Support							
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201		(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
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							
с 8	Add lines 7a and 7b Public support (Subtract line 7c from							
Sec	tion B. Total Support	L		l				
	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(f) Total
9	Amounts from line 6	(4) 2001	(5) 2000	(0) 2000	(4) 2010	(6, 25.	·	(1) 10121
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							
С	Add lines 10a and 10b							···-
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support. (Add lines 9, 10c, 11,							
4.4	and 12)	arganization's fact	coopd third face	th or fifth towns:	20 2 200ton 501(c)	(3)		
14	First five years. If the Form 990 is for the organization, check this box and stop here	•	secona, mra, mur	ui, or illui tax year	as a section 501(C)	(3)		▶ □
Sec	tion C. Computation of Public Su		age					
15	Public support percentage for 2011 (line 8,			(ft)			15	%
16	Public support percentage from 2010 Sche		•	(1))			16	<u> </u>
	tion D. Computation of Investme							
17	Investment income percentage for 2011 (lin			column (fl)			17	%
18	Investment income percentage from 2010						18	<u> </u>
19a	33 1/3% support tests—2011. If the organ			14, and line 15 is m	nore than 33 1/3%.	and line		
	17 is not more than 33 1/3%, check this bo							▶ □
b	33 1/3% support tests—2010. If the organ							
	line 18 is not more than 33 1/3%, check this							▶ □
20_	Private foundation. If the organization did	not check a box or	n line 14, 19a, or 1	9b, check this box	and see instruction	s		b

Schedule A (Form 990 or 990-EZ) 2011 WASHINGTON ASSOCIATION FOR

51-0645383

Page 4

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional information (See instructions)

SCHEDULE O

(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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

OMB No 1545-0047

Name of the organization

WASHINGTON ASSOCIATION FOR KOREAN SCHOOLS

Employer identification number 51-0645383

Form 990-EZ, Part I, Line 10 - Payments to Affiliates

Name and Address

Purpose

Amount

NAKS

\$

766

7613 98TH AVE CT SW

LAKEWOOD WA 98498

Form 990-EZ, Part I, Line 16 - Other Expenses

Description Amount

Expenses

ADVERTISING	\$	1,953
OFFICE EXPENSE	\$	881
CONFERENCES/MEETINGS	\$	3,661
CLASS EXHIBITION EVENTS	\$	3,939
COMFORT & CONDOLENCE	\$	299
LITERARY AND AUDITORY CON	\$	10,919
SPECIAL EVENT SUPPORT	\$	5,487
TEACHER APPRECIATION DAY	\$	12,080
TEACHER DEVELOPMENT CONFE	\$	11,991
TEXT BOOKS	\$	450
TEXTBOOK DELIVERY	\$	1,971
Non-investment Depreciation	\$	230
To	tal \$	53,861

Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description

Amount

Schedule O (Form 990 or 990-EZ) (2011)			Page 2
Name of the organization WASHINGTON ASSOCIATION FOR		Employer Identification 51-064538	
PRIOR YEAR FUND BALANCES	\$	0	
PRIOR YEAR ADJUSTMENT	\$	-8,946	
Form 990-EZ, Part II, Line 24 - Other Assets			
Description	Beg.	of Year End	of Year
	\$	2,000 \$	2,000
Less Accumulated Depreciation	\$	1,655 \$	1,885
Total	. \$	345 \$	115

Form 990-EZ, Part III - Primary Exempt Purpose

TO PROVIDE OPPORTUNITIES FOR IMPROVING KOREAN LANGUAGE AND

CULTURAL PROGRAMS AND DIALOGUE AMONG KOREAN SCHOOL

EDUCATORS

Form 990-EZ, Part III, Line 31 - All Other Accomplishment
TEXTBOOK AND RESOURCE SUPPORT
GENERAL PURPOSE FOR ORGANIZATION

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

2011

2011

Department of the Treasury Internal Revenue Service

► See separate instructions.

Attach to your tax return.

ttachment equence No

Name(s) shown on return

WASHINGTON ASSOCIATION FOR KOREAN SCHOOLS

Identifying number 51-0645383

Business or activity to which this form relates Indirect Depreciation **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 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (b) Cost (business use only) (c) Elected cost 6 (a) Description of property 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 13 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.) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions.) Part III Section A 230 17 MACRS deductions for assets placed in service in tax years beginning before 2011 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 (b) Month and year (c) Basis for depreciation (d) Recovery placed in (f) Method (business/investment use (e) Convention (a) Classification of property (a) Depreciation deduction penod only-see instructions? service 19a 3-year property b 5-year property 7-year property 10-year property d 15-year property 20-year property 25 угѕ S/L 25-year property S/L Residential rental 27 5 yrs MM property ММ S/L 27 5 yrs ММ Nonresidential real 39 yrs S/L property MM S/L Section C-Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System Class life S/L 20a 12 yrs S/L b 12-year S/L MM 40-year 40 yrs Summary (See instructions.) Part IV Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 230 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs 23