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DLN: 93493227013333

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)

2012

OMB No 1545-0047

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

Open to Public Inspection

			endar year, or tax year beginning C Name of organization	ng 01-01-2012 , 2012, and end	ding 12-31	-2012	D Employ	or idor	ntification number
	eck ıf a dress ch	ipplicable hange	THE WASHINGTON STEM CENTER						
_	me cha	,	Doing Business As WASHINGTON STEM				27-21	22165	,
_ Ind	tıal retu	ım		mail is not delivered to street address)	Room/suite	е	E Telepho	ne num	ber
Te	rmınate	ed	210 S HUDSON ST				(206)	658-4	320
_ Am	nended	return	City or town, state or country, and SEATTLE, WA 98134	I ZIP + 4			(===)		
Ap	plication	n pending					G Gross re	ceipts \$	874,603
			F Name and address of pr PATRICK D'AMELIO	incipal officer			this a group	return	
			210 S HUDSON ST			aff	liates?		┌ Yes ┌ No
			SEATTLE, WA 98134						ded?
r Ta	ıx-exen	npt status	<u> </u>	(insert no)	527	If'	'No," attach	a lıst	(see instructions)
			VW WASHINGTONSTEM ORG	(H(c) G	oup exempti	on nun	nber ►
く For	m of or	ganızatıon	Corporation Trust Associat	ion Cother ►		L Year of	formation 200		State of legal domicile
Рa	rt I	Sum	ımary					WA	4
			-	ion or most significant activities					
				TY IN SCIENCE, TECHNOLOG		EERING A	ND MATH (STEM)	EDUCATION
Ų			•	•			•		
≟									
Ě	.								
soveniance	2	Check th	nis box 🔭 if the organization o	discontinued its operations or di	isposed of	more thai	n 25% of its	net as	sets
	,	Number	of voting members of the gover	ning body (Part VI, line 1a) .				3	9
Activities &				of the governing body (Part VI				4	8
₿				n calendar year 2012 (Part V, III				5	19
₹				necessary)				6	10
₹.				Part VIII, column (C), line 12				7a	0
				from Form 990-T, line 34 .				7b	0
						Р	rior Year		Current Year
	8	Contri	ibutions and grants (Part VIII,	line 1h)			17,380,2	04	844,185
∄	9	Progra	am service revenue (Part VIII,	20,0	00	0			
Ravenue	10	Inves	tment income (Part VIII, colun	nn (A), lines 3, 4, and 7d) .				0	-224
ά	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1	l1e)			0	0
	12			1 (must equal Part VIII, columr			17,400,2	04	843,961
	13			t IX, column (A), lines 1–3) .			1,891,3	_	2,079,252
	14			IX, column (A), line 4)			2,002,0	0	0
	15		·	yee benefits (Part IX, column (A					
\$		5-10			,,		1,334,8	85	2,216,824
Expenses	16a	Profes	ssional fundraising fees (Part IX	(, column (A), line 11e)				0	0
ਡੋ	Ь		ındraısıng expenses (Part IX, column (
	17			, lines 11a-11d, 11f-24e) .			2,098,7	_	982,279
	18			ust equal Part IX, column (A), lı	-		5,325,0	_	5,278,355
<u> </u>	19	Reven	ue less expenses Subtract line	e 18 from line 12			12,075,1 ing of Currer		-4,434,394
net Assets of Fund Balances						Degiiiii	Year		End of Year
8. E.	20						15,165,9		10,659,830
¥ 25	21						2,188,0		189,183
	22	_	ssets or fund balances Subtrac nature Block	t line 21 from line 20			12,977,9	02	10,470,647
	rt II								
ny k	nowled	dge and		xamined this return, including acomplete Declaration of preparer					
		****					2013-08-15		
Sigr		'	ature of officer				Date		
Her	ਦ		OY J GUSTAFSON CFO e or print name and title						
		<u> </u>	Print/Type preparer's name	Preparer's signature	Da	te 7	Check If	PTIN	
Paid	d	9	SARA ELIZABETH J HYRE	,		13-07-12	elf-employed	P00235	
	_u pare	۱۰ ۱	Firm's name F CLARK NUBER PS			F	ım's EIN 🕨 91	-119401	16
	Pare On		Firm's address 🕨 10900 NE 4TH STREE	T SUITE 1700		F	hone no (425)	454-49	919
Jac	<i>,</i> OII	יע	BELLEVUE, WA 98004				, ,		
		I	DELLEVOL, WAY 2000	•		I			

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes 厂No

Forn	n 990 (2012)							Page 2
Par		ent of Program Serv chedule O contains a res			· · · · · · · · · · · · · · · · · · ·			
1	Briefly describe	the organization's missior	1					
TEC	HNOLOGY, ENGIN	IS A STATEWIDE NONPF NEERING AND MATH (ST AL STEM NETWORKS AN	EM) EDUCAT	ION THROUGH LINE	KED STRATEGIES WHIC			AND
_								
2	Did the organizat the prior Form 99	ion undertake any signific	ant program s	ervices during the ye	ar which were not listed	on • • •	┌ Yes ┌ N	 ło
	If "Yes," describe	these new services on S	chedule O					
3	Did the organizat	ion cease conducting, or i	make sıgnıfıca	nt changes in how it c	onducts, any program		┌ Yes ┌ I	No
	If "Yes," describe	these changes on Sched	ule O					
4	expenses Section	anization's program servic on 501(c)(3) and 501(c)(4 es, and revenue, if any, for	l) organızatıon	s are required to repo				
4a	(Code) (Expenses \$	1,281,548	ıncludıng grants of \$	686,212) (Rever	nue \$)	
		RKS WASHINGTON STEM LEARN M EDUCATION AND DRIVE LOCA			MENTS THAT SUPPORT COMM	IUNITIES AND	REGIONS IN OUR	STATE
4b	(Code) (Expenses \$	1,835,683	ıncludıng grants of \$	982,927) (Rever	nue \$)	
		S WASHINGTON STEM PORTFO YPES OF PORTFOLIO AWARDS, E						(ON
4c	(Code) (Expenses \$	765,914	ıncludıng grants of \$	410,113) (Rever	nue \$)	
	AWARDS PROVIDE	1 ENTREPRENEUR AWARDS SU INCENTIVE FOR EDUCATORS IN AN BE EXTENDED STATEWIDE						

) (Revenue \$

Other program services (Describe in Schedule O)

Total program service expenses ►

including grants of \$

3,883,145

4d

(Expenses \$

Part IV Checklist of Required Schedule
--

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A^{2}	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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? <i>If</i> "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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^{\bullet}	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II"	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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		No
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^{\bullet}	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
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	Yes	
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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Par	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	 Yes	l
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 21		103	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
L	by this return	1		
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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 the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			1
		8		
9	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Greec receipts, included on Form 990, Part VIII, line 12, for public use of club.			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
l 1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	[
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Se	ection 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			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		No
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		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►CINDY GUSTAFSON CFO 210 S HUDSON STREET SEATTLE, WA (206) 658-4320

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ♦ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list	more pers	than on is	one bot	C) o not check e box, unless oth an officer tor/trustee)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	any hours for related organizations below dotted line)	a Individual trustee or director	ট o Institutional Trustee				Former	organization (W- 2/1099- MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) DEAN ALLEN PRESIDENT	4 00	х		х				0	0	0
(2) BRAD SMITH	1 00									
		х		Х				0	0	0
VICE PRESIDENT (3) ELSON FLOYD	1 00				<u> </u>		\vdash			
•	1 00	х		Х				0	0	0
TREASURER	1.00									
(4) MARY ALICE HEUSCHEL	1 00	х		Х				0	0	0
SECRETARY										
(5) BILL LEWIS	5 00	x						0	0	0
DIRECTOR										
(6) BARBARA HULIT	1 00									
DIRECTOR		Х						0	0	0
(7) NORM RICE	2 50									
DIRECTOR		Х						0	0	0
(8) MIKE DELANEY	1 00									
		Х						0	0	0
DIRECTOR (9) GARY LIVINGSTON	1 00									
	100	х						0	0	0
DIRECTOR					_		_			
(10) ELAINE BERAZA	3 00	х						0	0	0
DIRECTOR										
(11) CAROLINE KING	45 00			х				184,000	0	24,183
C00				_^	L	L_	L	164,000		24,103
(12) SANDI EVERLOVE	45 00							222.5	_	
INTERIM CEO				Х				200,000	0	17,802
(13) CINDY GUSTAFSON	45 00									
CHIEF FINANCIAL OFFICER				Х				78,981	0	10,840
(14) PATRICK D'AMELIO	45 00									
	13 00			Х				111,539	0	8,256
CHIEF EXECUTIVE OFFICER	45.00					<u> </u>	\vdash			
(15) CAROLYN LANDEL	45 00				х			153,384	0	18,907
CHIEF PROGRAM OFFICER										<i>,</i>
(16) RUBY LOVE	45 00				x			178,750	0	19,175
CHIEF DEVELOPMENT OFFICER					L			176,730		
										Form 900 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	more t	n is	ne l both	box, an c		;	(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W-		(F) Estima amount of compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)) 0	organizati relate organiza	ed
												-		
1b	Sub-Total							<u> </u>				+		
c	Total from continuation sheet	s to Part VII, S	ection A	١.		•		Þ						
d	Total (add lines 1b and 1c) .							۰		906,654		0		99,163
2	Total number of individuals (in \$100,000 of reportable comp						d abov	e) wl	ho receive	d more th	an			
	\$100,000 of reportable comp		e organ	12011) F .									
		66											Yes	No
3	Did the organization list any f oon line 1a? <i>If</i> "Yes," complete 5					кеу •	emplo	yee, •	or nighes ,	compen	sated employee	3		No
4	For any individual listed on lin													
_	Individual				•	•						4	Yes	
5	5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person												No	
Se	ection B. Independent Co	ntractors												
1	Complete this table for your fi	ve highest comp											tay usa:	
	compensation from the organi	(A)		ation	101	ine C	arend	агуе	ar enung		(B)	IOIIS	's tax year (C)	
POP I	NC 1326 5TH AVENUE SUITE 800 SEAT	lame and business TLE WA 98101	address								cription of services EVELOPMENT	\dashv	Comper	132,025
	TEGIES 360 INC 1505 WESTLAKE AVEN		EATTLE W	/A 981	09						ATIONS AND PR			127,212

(A) Name and business address	(B) Description of services	(C) Compensation
POP INC 1326 5TH AVENUE SUITE 800 SEATTLE WA 98101	WEBSITE DEVELOPMENT	132,025
STRATEGIES 360 INC 1505 WESTLAKE AVENUE N SUITE 1000 SEATTLE WA 98109	COMMUNICATIONS AND PR	127,212
Takal a samban of sadan and out a sakar akar Karaladan a kakarak lambad ka kha a a la		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►2

		ile O contains a respo		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or
<u>n</u> 1a	Federated camp	paigns 1a					
	Membership due	es 1 b	·				
] c	Fundraising eve	ents 10	:				
- d	Related organiz	ations 1 d					
<u> </u>	Government grants	(contributions) 1e					
, ,	All other contributio	ons, gifts, grants, and 1f	844,185				
<u> </u>	sımılar amounts no	t ıncluded above					ļ
5 9	Noncash contributio 1a-1f \$	ons included in lines					
<u> </u>	Total. Add lines	1a-1f	🗼	844,185			
-			Business Code				
28	1						
b							
c							
d							
e							
f	All other progra	m service revenue					
g	Total. Add lines	2a-2f					
3		ome (including divider ar amounts)					
4		tment of tax-exempt bond	F				
5	Royalties		🕨				
	[(ı) Real	(II) Personal				
66							
6	Less rental expenses						
0	Rental income or (loss)						
d	Net rental incon	ne or (loss)					
_	Gross amount	(ı) Securities	(II) Other				
78	from sales of assets other than inventory	30,418					
b		30,642					
	sales expenses	-224					
d	Net gain or (loss)			-224			-2
88		rom fundraising					
		reported on line 1c) e 18 a					
ь	Less direct exp	penses b					
c		loss) from fundraising	events				
98	Gross income fr See Part IV, line	om gaming activities e 19					
Ь	Less direct exp	penses b					
С		loss) from gamıng act					<u>L</u>
10a	Gross sales of i						
	returns and allo	wances . a					
ь	Less costofgo						
		loss) from sales of inv	entory				<u></u>
	Miscellaneous	Revenue	Business Code				
11 a	1						
ь)						
0							
	All other revenu	ie					
d							I

843,961

Form	990 (2012)				Page 10
Part					
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All			lete column (A)	
	Check if Schedule O contains a response to any question in this Pa		(B)] (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,079,252	2,079,252		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,005,817	352,834	266,802	386,181
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	940,967	712,888	146,866	81,213
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	71,233	32,603	25,203	13,427
9	Other employee benefits	64,532	49,849	9,749	4,934
10	Payroll taxes	134,275	73,175	30,306	30,794
11	Fees for services (non-employees)				
а	Management				
b	Legal	8,882	8,544		338
С	Accounting	69,282		69,282	
d	Lobbying	,		, , , , , , , , , , , , , , , , , , ,	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	370,095	259,711	65,742	44,642
12	Advertising and promotion	35,347	28,350	6,011	986
13	Office expenses	55,800	10,948	38,710	6,142
14	·	,	,	· •	
	Information technology	178,794	124,475	31,840	22,479
15	Royalties	110.611	F0 730	24.047	20.065
16 17	Occupancy	110,611	59,729	21,017	29,865
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	70,269	67,210		3,059
19	Conferences, conventions, and meetings	15,662	14,879	44	739
20	Interest	15,002	17,079	77	
21	Payments to affiliates			 	
22	Depreciation, depletion, and amortization	15,077		15,077	
23	Insurance	2,284		2,284	
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 O)	2,204		2,204	
а	CULTIVATION EVENTS	18,480			18,480
b	BUSINESS BREAKFASTS	4,814			4,814
c	WINTER LUNCHEON	2,823			2,823
d	OUTREACH	2,151			2,151
e	All other expenses	21,908	8,698	7,720	5,490
25	Total functional expenses. Add lines 1 through 24e	5,278,355	,	 	658,557
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)	3,210,333	5,005,115	,30,033	030,331

Form 990 (2012) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year 3,001,113 2,574,010 1 1 2 2 Savings and temporary cash investments 12,102,334 3 8,045,343 Pledges and grants receivable, net 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 6 7 8 8 7,686 9 9 1,384 10a Land, buildings, and equipment cost or other basis Complete 58.033 10a Part VI of Schedule D 18,940 54,818 b Less accumulated depreciation 10b 10c 39,093 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 14 14 15 **15** 16 Total assets. Add lines 1 through 15 (must equal line 34) 15,165,951 16 10,659,830 108,911 218,270 **17** 17 1.969,779 80.272 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 2,188,049 26 **Total liabilities.** Add lines 17 through 25 26 189,183 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 986,287 27 2,542,881 7.927.766 11,991,615 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ö 30 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund

32

33

¥

Retained earnings, endowment, accumulated income, or other funds

10,470,647

10,659,830

32

33

12,977,902

15,165,951

Pai	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		• •	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		8	343,961
2	Total expenses (must equal Part IX, column (A), line 25)				
		2		5,2	278,355
3	Revenue less expenses Subtract line 2 from line 1	3		-4.4	134,394
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				,
		4		12,9	977,902
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities				
		6			
7	Investment expenses	7			
8	Prior period adjustments				
	The period adjustments I I I I I I I I I I I I I I I I I I I	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1 (127 120
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	9			927,139
	column (B))	10		10,4	170,647
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. <u>_</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie	wed on			
	a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis		,		
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	arate			
	Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	it of the			
	audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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As Filed Data -

DLN: 93493227013333

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

Inspection

		ne organ							Employer	ident if icat ic	n number	
THE	VASHIN	GTON STE	M CENTER						27 2122	160		
Dа	rt I	Reas	on for Pu	ıblic Charity Sta	tus (All or	nanizations	s must comi	nlete this r	27-2133: art See			
				te foundation becaus						i decions	•	
1				ion of churches, or a								
2	, T			d in section 170(b)(1					,,(-,(-,,			
3	, _			perative hospital se				n 170(b)(1)	(A)(iii).			
4	, T			h organization opera						′1)(A)(iii). F	nter the	
•	'			ity, and state	cca iii conjan	iccioni michi d	nospital des			-)(/-)()	incor end	
5				erated for the benefi	t of a college	or universi	ty owned or o	perated by a	governmen	tal unit desc	ribed in	
		sect ior	170(b)(1)((A)(iv). (Complete P	art II)							
6	Γ	A fede	ral, state, or	local government o	rgovernmen	tal unit desc	rıbed ın secti	on 170(b)(1	.)(A)(v).			
7	~	_		at normally receives		•	support from	a governme	ntal unit or f	rom the gen	eral public	
_	_			on 170(b)(1)(A)(vi).								
8	<u> </u>		-	described in sectio i			-	-				
9	ı			at normally receives								
		•		rities related to its e		-			` '			
				oss investment inco						tax) from bu	isinesses	
10	_			ganızatıon after June								
10	<u> </u>	_		ganızed and operate								
11	ı			ganized and operated ly supported organiz								
				ibes the type of supp						ee section :	os(a)(s). Check	
			┌ Type I							on-functiona	illy integrated	
е	Γ	•	_	ox, I certify that the	-						•	
				ion managers and ot	her than one	or more pub	olicly support	ed organızat	ions describ	ed in sectio	n 509(a)(1) or	
f			n 509(a)(2)	received a written d	etermination	from the IR	Sthatitica	Tyne I Tyn	a II or Type	III sunnort	ing organization	
•			this box	received a written a	ccciiiiiiacioii	mom the IN	S that it is a	1 9 0 2 1 , 1 9 0	2 11, OI 1 ypc	TIT Support		
g				2006, has the organ	ızatıon accep	oted any gift	or contributi	on from any	of the			
			ng persons?									
				rectly or indirectly o				persons des	scribed in (ii		Yes No	
		•		governing body of th		_	n /			119		
			•	er of a person descr			- 1 2			11g		
L		• •		lled entity of a perso		., .,				11g	(111)	
h		Provide	e the followi	ng information about	the support	eu organizat	.1011(5)					
	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfv	(vi) Is	the	(vii) A mount of	
	suppoi			organization	organizat		the organi		organizat		monetary	
o	rganiz	ation		(described on	col (i) lıs		ın col (i) d	,	col (i) org		support	
				lines 1-9 above or IRC section	your gove docume		suppor	t?	ın the U	5 7		
				(see	uocuille	inc'						
				instructions))	Yes	No	Yes	No	Yes	No	1	
					162	INO	res	INO	res	INO		
										1	1	
							1					

instructions

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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 2,175,497 17,380,204 844,185 20,399,886 include any "unusual grants ") 7 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 2,175,497 17,380,204 844,185 20,399,886 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 16,918,008 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 from 3,481,878 line 4 Section B. Total Support Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 **(e)** 2012 (f) Total beginning in) 🟲 20,399,886 2,175,497 17,380,204 844,185 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried 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 20,399,886 through 10) Gross receipts from related activities, etc (see instructions) 12 12 20,000 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage for 2011 Schedule A, Part II, line 14 15 15 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶┌ organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	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, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,	 	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493227013333

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** THE WASHINGTON STEM CENTER 27-2133169 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

		•9•
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election	n
	under section 501(h)).	

- Check F If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means a	(a) Filing organization's totals	(b) Affiliated group totals		
a	Total lobbying expenditures to influence public of	opinion (grass roots lobbying)		0	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		0	
c	Total lobbying expenditures (add lines 1a and 1	b)		0	
d	Other exempt purpose expenditures			5,278,355	
e	Total exempt purpose expenditures (add lines 1	5,278,355			
f	Lobbying nontaxable amount Enter the amount columns	413,918			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)		103,480	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		0	
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 4	720 re	orting	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) Total beginning in) 416,250 413,918 830,168 Lobbying nontaxable amount Lobbying ceiling amount 1,245,252 (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount 104,062 103,480 207,542 Grassroots ceiling amount 311,313 (150% of line 2d, column (e)) Grassroots lobbying expenditures

filed Form 5768 (election under section 501(h)).		(a) (b)			
For e activ	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Aı	mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
Ь	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c))(5), o		
			_		Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?		⊢	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		<u> </u>	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Par	till-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
Ь	Carryover from last year	2b			
	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
•	political expenditure next year?	4			

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
PART IV, SUPPLEMENTAL INFORMATION		SCHEDULE C, PART II-A THE 501(H) ELECTION WAS MADE IN 2011, THUS ONLY COLUMN C AND COLUMN D ARE REQUIRED TO BE COMPLETED ON PART II-A, LINE 2 THE ELECTION WAS NOT REVOKED AS OF THE START OF THE ORGANIZATION'S TAX YEAR THAT BEGAN IN 2012

DLN: 93493227013333

OMB No 1545-0047

Open to Public **Inspection**

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.

Name of the organization **Employer identification number** THE WASHINGTON STEM CENTER 27-2133169 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the tax year 🟲 Number of states where property subject to conservation easement is located ▶___ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

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

Cat No 52283D Schedule D (Form 990) 2012

Par	Organizations Maintaining Co	<u>llections of Ar</u>	t, His	itori	<u>cai ii</u>	<u>reasur</u>	es, or O	<u>tnei</u>	r Similar As	sets (continued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other reco	rds, cl	neck	any of	the follo	wing that a	re a	sıgnıfıcant use	ofits	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	llections and expl	aın ho	w the	y furth	er the or	ganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit o										
Do	assets to be sold to raise funds rather than t									Yes	l No
Fell	t IV Escrow and Custodial Arrange Part IV, line 9, or reported an am						answered	יו ג	es to rolling	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	ford	ontribi	utions or	other ass	ets n	iot	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follo	wing	able		_				
							-		An	nount	
С	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, Iır	ne 21?	•						│ Yes	□ No
_ь	If "Yes," explain the arrangement in Part XII										
Pa	rt V Endowment Funds. Complete i								t IV, line 10. Three years back	(-)Faur	waara baak
1a	Beginning of year balance	(a)Current year	(B) Prior	year	B (C)IW	о уеатѕ васк	(a)	niee years back	(e)rour	years back
b	Contributions										
c	Net investment earnings, gains, and losses										_
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balan	ice (lir	ne 1g	, colum	nn (a)) he	eld as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ►										
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	ıld equal 100%									
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	zatıon	that	are hel	d and ad	lmınıstered	for	the	Yes	s No
	(i) unrelated organizations		-					•	3a		<u> </u>
	(ii) related organizations								3a(
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of th							•	3	p	
	t VI Land, Buildings, and Equipme					10.					
	Description of property			T (a) Cost		(b)Cost or basis (oth		(c) Accumulate depreciation	d (d)	Book value
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment						58	,033	18,9	940	39,093
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colι	ımn (B), line	10(c).)			🛌		39,093

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or category	(b)Book value	(c) Metho	d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See		<u> </u> 13	
(a) Description of investment type	(b) Book value		d of valuation
	(=, ===================================		-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			
(a) Descrip			(b) Book value
-			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	7.)		
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
reactar meanic taxes			
-			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	İ		

	ei ketuii	its with kevenue po	₃menτ	State	i Financiai	econciliation of Revenue per Audite	art XI	-61
851,231	1			nts	ncıal statem	venue, gains, and other support per audited fin	Tota	1
					/III, line 12	s included on line 1 but not on Form 990, Part	A mo	2
			2a	.		ealized gains on investments	Net	а
		7,046	2b	. [d services and use of facilities	Don	b
			2c	. [ries of prior year grants	Rec	C
			2d	[Describe in Part XIII)........	Oth	d
7,046	2e					es 2a through 2d	Add	e
844,185	3	[t line 2e from line 1	Subf	3
					not on line 1	s included on Form 990, Part VIII, line 12, bu	A mo	4
			4a	.	/III, line 7b	nent expenses not included on Form 990, Part	Inve	а
		-224	4b	. [Describe in Part XIII)........	Oth	b
-224	4c					es 4a and 4b	Add	c
843,961	5	[12).	, line	m 990, Part	venue Add lines 3 and 4c. (This must equal Fo	Tota	5
ırn	per Retu	nts With Expenses	temen	I Sta	d Financia	econciliation of Expenses per Audite	rt XII	Part
5,285,401	1				ents	penses and losses per audited financial stater	Tota	1
					X, line 25	s included on line 1 but not on Form 990, Part	A mo	2
		7,046	2a			services and use of facilities	Dona	а
			2b			ar adjustments	Prior	b
			2c			sses	Othe	C
			2d			Describe in Part XIII)........	Othe	d
7,046	2e					s 2a through 2d	Add	e
5,278,355	3	[t line 2e from line 1	Subt	3
					ot on line 1:	s included on Form 990, Part IX, line 25, but n	A mo	4
			4a		III, line 7b	nent expenses not included on Form 990, Part	Inve	а
			4b			Describe in Part XIII)........	Othe	b
						s 4a and 4b	Add	c
0	4c			•				

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

Identifier	Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS		LOSS ON SALE OF SECURITIES -224

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

(Form 990)

Department of the Treasury

Schedule I

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

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

OMB No 1545-0047

DLN: 93493227013333

Open to Public

Internal Revenue Service		'	Attach to Form 990				Inspection
Name of the organization THE WASHINGTON STEM CENTER						Employer identificati	on number
THE WASHINGTON STEM CENTER						27-2133169	
Part I General Informatio	n on Grants and	Assistance					
1 Does the organization maintain in the selection criteria used to aw	ard the grants or ass	ıstance?			the grants or assist	ance, and	∀ Yes
2 Describe in Part IV the organiza	•						
Part II Grants and Other As Form 990, Part IV, line							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	
See Additional Data Table							

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .

Enter total number of other organizations listed in the line 1 table

37

art III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, P	art IV, line 22.
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 THE ORGANIZATION MAINTAINS A FILE FOR EACH GRANTEE WHICH INCLUDES THE GRANT PROPOSAL AND BUDGET, THE AWARD AGREEMENT, CORRESPONDENCE AND THE GRANTEE REPORTS PROGRAM STAFF ALSO SPEAK WITH GRANTEES BY PHONE, VISIT AWARDEES IN PERSON AND COMMUNICATE BY EMAIL AND OTHER METHODS ABOUT EACH PROJECT STATUS AND COMPLETION OF PROJECT WORK GRANTEES ARE REQUIRED TO SUBMIT PROGRESS REPORTS ANNUALLY OR AT THE END OF THE GRANT

(h) Purpose of grant

Software ID: Software Version:

EIN: 27-2133169

Name: THE WASHINGTON STEM CENTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code section (d) Amount of cash (e) Amount of non- (f) Method of (g) Description of

organization or government	(b) LIN	ıf applicable	grant	cash	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
BREMERTON HIGH SCHOOL 1500 13TH STREET BREMERTON,WA 98337		GOVERNMENT	10,000		53.617		ENTREPRENEUR A WARD - ROUND 3
CHENEY MIDDLE SCHOOL 2716 NORTH 6TH STREET CHENEY, WA 99004		GOVERNMENT	10,000				ENTREPRENEUR AWARD - ROUND 3
FEIRO MARINE LIFE CENTERPO BOX 625 PORT ANGELES, WA 98362	26-1957956	501(C)(3)	10,000				ENTREPRENEUR AWARD - ROUND 3
GLACIER PEAK HIGH SCHOOL7401 144TH PLACE SE		GOVERNMENT	10,000				ENTREPRENEUR AWARD - ROUND 3
SNOHOMISH, WA 98296 GONZAGA UNIVERSITY502 E BOONE AVENUE SPOKANE, WA 99258	91-0236600	SCHOOL	10,000				ENTREPRENEUR A WARD - ROUND 3
MATHEMATICS EDUCATION COLLABORATIVEPO BOX 716 FERNDALE, WA 98248	91-1906808	501(C)(3)	34,542				ENTREPRENEUR AWARD - ROUND 3
MONROE HIGH SCHOOL 200 E FREMONT MONROE, WA 98272		GOVERNMENT	10,000				ENTREPRENEUR AWARD - ROUND 3
MOUNT ST HELENS INSTITUTE42218 NE YALE BRIDGE RD AMBOY,WA 98601	91-1569993	501(C)(3)	10,000				ENTREPRENEUR AWARD - ROUND 3
MOUNTAINSIDE MIDDLE SCHOOL2323 E FARWELL ROAD COLBERT, WA 99005		GOVERNMENT	9,400				ENTREPRENEUR AWARD - ROUND 3
RAINIER BEACH HIGH SCHOOL3305 35TH AVENUE S SEATTLE, WA 98144		GOVERNMENT	10,000				ENTREPRENEUR AWARD - ROUND 3
SAGHALIE MIDDLE SCHOOL33914 19TH AVENUE SW FEDERAL WAY, WA 98023		GOVERNMENT	10,000				ENTREPRENEUR AWARD - ROUND 3
TACOMA PUBLIC SCHOOLS PO BOX 1357 TACOMA, WA 98401		GOVERNMENT	9,966				ENTREPRENEUR AWARD - ROUND 3
TIERRA MADRE FUNDPO BOX 17844 SEATTLE, WA 98127	05-0630992	501(C)(3)	9,625				ENTREPRENEUR AWARD - ROUND 3
WOODLAND PARK ZOO601 NORTH 59TH STREET SEATTLE, WA 98103	91-6070005	501(C)(3)	10,000				ENTREPRENEUR AWARD - ROUND 3
BREWSTER SCHOOL DISTRICTPO BOX 97 BREWSTER, WA 98812		GOVERNMENT	15,900				ENTREPRENEUR AWARD - ROUND 4
ESD 105 & NORTH CENTRAL ESD 17133 S 2ND AVENUE YAKIMA,WA 98902		GOVERNMENT	15,000				ENTREPRENEUR AWARD - ROUND 4
ELLENSBURG SCHOOL DISTRICT1203 EAST CAPITOL AVENUE ELLENSBURG, WA 98926		GOVERNMENT	10,000				ENTREPRENEUR AWARD - ROUND 4
MATH FOR LOVE1107 E DENNY WAY APT A8 SEATTLE, WA 98122	45-3777028	501(C)(3)	12,720				ENTREPRENEUR AWARD - ROUND 4
MOBIUS SPOKANE811 W MAIN AVENUE SPOKANE, WA 99201	91-1694299	501(C)(3)	5,700				ENTREPRENEUR AWARD - ROUND 4
POWERFUL SCHOOLS3401 RAINIER AVENUE SOUTH SEATTLE, WA 98144	91-1551141	501(C)(3)	20,000				ENTREPRENEUR A WARD - ROUND 4
SCIENCE AND MATH INSTITUTE (SAMI)PO BOX 110555 TACOMA,WA 98411	91-2168988	501(C)(3)	6,000				ENTREPRENEUR AWARD - ROUND 4
SUNNYSIDE SCHOOL DISTRICT910 N ASH STREET SPOKANE,WA 99201		GOVERNMENT	15,000				ENTREPRENEUR AWARD - ROUND 4
THE COMMUNITY SCHOOL LINCOLN BUILDING SUNNYSIDE, WA 98944		GOVERNMENT	10,800				ENTREPRENEUR AWARD - ROUND 4
THE ENRICHMENT COOPERATIVE AT BRYANT 1300 WEST KNOX AVENUE SPOKANE,WA 99205		GOVERNMENT	12,210				ENTREPRENEUR AWARD - ROUND 4
TUMWATER SCHOOL DISTRICT621 LINWOOD STREET TUMWATER,WA 98512		GOVERNMENT	13,380				ENTREPRENEUR AWARD - ROUND 4
VASHON ISLAND SCHOOL DISTRICT9309 SW CEMETERY ROAD VASHON,WA 98070		GOVERNMENT	12,960				ENTREPRENEUR AWARD - ROUND 4
WASHINGTON GREEN SCHOOLS4649 SUNNYSIDE AVE N SUITE 303 SEATTLE, WA 98103	27-5411173	501(C)(3)	15,000				ENTREPRENEUR AWARD - ROUND 4
BELLEVUE SCHOOL DISTRICT12111 NE 1ST STREET BELLEVUE, WA 98005		GOVERNMENT		34,548		STEM STAFF TIME CONSULTING	PORTFOLIO AWARD - ROUND 1
WASHINGTON STATE MESA (UNIV OF WA)394 SCHMITZ HALL BOX 355845 SEATTLE, WA 98195		GOVERNMENT	197,652				PORTFOLIO AWARD - ROUND 1
TECHNOLOGY ACCESS FOUNDATION4436 RAINIER AVENUE S SUITE B	91-1731833	501(C)(3)	200,000				PORTFOLIO AWARD - ROUND 1
SEATTLE, WA 98118		1				I	I

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Form 990,3chedule 1, Par	t II, Grants an	a other Assistance	to dovernments a	ma Organization	3 III tile ollitea Sta	···	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance I,	(h) Purpose of grant or assistance
NOOKSACK VALLEY SCHOOL DISTRICTANACORTES SCHOOL DISTRICT3326 E BADGER ROAD NOOKSACK, WA 98276	_	GOVERNMENT	200,000				PORTFOLIO AWARD - ROUND 2
OLYMPIC COLLEGE1600 CHESTER AVENUE BREMERTON,WA 98337	_	GOVERNMENT	64,842				PORTFOLIO AWARD - ROUND 2
UNIVERSITY OF WASHINGTONMILLER HALL BOX 353600 SEATTLE, WA 98195	_	GOVERNMENT	210,000				PORTFOLIO AWARD - ROUND 2
UNIVERSITY OF WASHINGTON TACOMA 1900 COMMERCE STREET BOX 358426 TACOMA, WA 98402	_	GOVERNMENT	107,250				PORTFOLIO AWARD - ROUND 2
SPOKANE LEARNING NETWORKPO BOX 1495 SPOKANE, WA 99210	91-1896341	501(C)(3)	220,000				STEM NETWORK
SOUTH KING COUNTY LEARNING NETWORK800 OAKSDALE AVENUE SW SEATTLE, WA 98057		GOVERNMENT	269,775				STEM NETWORK
YAKIMA STEM LEARNING NETWORK33 SOUTH SECOND AVENUE YAKIMA,WA 98902		GOVERNMENT	196,437				STEM NETWORK

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization THE WASHINGTON STEM CENTER **Employer identification number**

27-2133169

	Questions Regarding Compensation			V	Na.
1a	Check the appropriate box(es) if the organization provided any o	of the following to or for a person listed in Form		Yes	No
	990, Part VII, Section A, line 1a Complete Part III to provide				
	First-class or charter travel	ousing allowance or residence for personal use			
		lyments for business use of personal residence			
		ealth or social club dues or initiation fees			
	Discretionary spending account Pe	ersonal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization reimbursement or provision of all of the expenses described above.		1b		
2	Did the organization require substantiation prior to reimbursing directors, trustees, and the CEO/Executive Director, regarding		2		
3	Indicate which, if any, of the following the filing organization use organization's CEO/Executive Director Check all that apply D used by a related organization to establish compensation of the	o not check any boxes for methods			
	☐ Compensation committee ☐ Wr	ritten employment contract			
		ompensation survey or study			
	Form 990 of other organizations	oproval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Se or a related organization	ection A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqua	ılıfıed retırement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compe	ensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the a	pplicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete	e lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did compensation contingent on the revenues of	d the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did compensation contingent on the net earnings of	d the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did payments not described in lines 5 and 6? If "Yes," describe in		7		No
8	Were any amounts reported in Form 990, Part VII, paid or accusubject to the initial contract exception described in Regulation in Part III	·	_		NI -
^		and the second s	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable section 53 $4958-6(c)$?	e presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)CAROLINE KING COO	(i) (ii)	175,000 0	9,000 0	0	12,396 0	11,787 0	208,183 0	0
(2)SANDI EVERLOVE INTERIM CEO	(i) (ii)	170,000 0	30,000 0	0	6,015 0	11,787 0	217,802 0	0
(3)CAROLYN LANDEL CHIEF PROGRAM OFFICER	(i) (ii)	143,288 0	0	10,096 0	7,120 0	11,787 0	172,291 0	o 0
(4)RUBY LOVE CHIEF DEVELOPMENT OFFICER	(i) (ii)	170,000 0	8,750 0	0	7,388 0	11,787 0	197,925	0

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Identifier	Return Reference	Explanation
	PART I, LINE 4A	CAROLYN LANDEL RECEIVED SEVERANCE PAYMENT OF \$10,096

Schedule J (Form 990) 2012

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Schedule L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

2012

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Name of the organ		₹						En	ploye	r identif	fication	numbei	•
Down T. Evene	. Bonof	it Tunn	anations (coction [and costion [501(c)(4) ord		-213				
							501(C)(4) Org 5a or 25b, or F					10b	
1 (a) Name o			on (b) Re	lationship	between dis	qualified	(c) Descrip					(d) Corr	ected?
				person an	d organızatı	on					`	Yes	No
											$-\!\!\!+$		
											$-\!\!\!+$		
2 Enter the am	ount of ta	x inclirre	d by organiza	ation man	aners or disc	nualified perso	ons during the	veari	ınder	section			
4958										F \$			
3 Enter the amo	ount of ta	x, ıf any,	on line 2, abo	ove, reimb	oursed by th	e organızatıor	1			F \$			
Part II Loar	s to an	d/or F	rom Inter	ested P	ersons.								
Comp	lete if the	organiz	ation answere	ed "Yes" o	n Form 990		ine 38a, or Fo	rm 99	0,Par	t IV , lın	e 26, o	r ıf the	
organ (a) Name of			(c) Purpose			(e)Original	(f)Balance	(a)) In	(h		(i)Wr	ıttan
interested	with orga			or from		principal	due		ult?	Appro	ved	agreer	
person				organiza	tion?	amount				by boa			
				То	From			Yes	No	Yes	No	Yes	No
													•
											<u> </u>	_	
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											 	_	
Total				▶ \$								7	
Part IIII Gran	ts or As	ssistan	ce Benefit	ting Int	erested F	Persons.						•	
							t IV, line 27.		.	(-)	D		
(a) Name of inte person	restea		atıonshıp bet ted person ar		c) Amount o	fassistance	(d) Type of	assis	tance	(e)	Purpos	e of ass	istance
		(organization										
							_						
							_						
							-						

Part IV Business Transactions						
Complete if the organizat	<u>ion answered "Yes" on I</u>	<u>Form 990, Part IV, lır</u>	e 28a, 28b, or 28c.			
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	
(1) MCKINSTRY COMPANY	ENTITY MORE THAN 35% OWNED BY DEAN ALLEN, PRESIDENT	154,608	MCKINSTRY COMPANY PROVIDED OFFICE SPACE AND PROFESSIONAL SERVICES TO WASHINGTON STEM AT FAIR MARKET VALUE		No	

Part V Supplemental Information

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

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2012

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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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Name of the organization THE WASHINGTON STEM CENTER	

Employer identification number

27-2133169

ldentifier	Return Reference	Explanation
	FORM 990, PART I, LINE 6	THE BOARD IS COMPRISED OF VOLUNTEERS
	FORM 990, PART VI, SECTION B, LINE 11	SENIOR MANAGEMENT WILL REVIEW THE DRAFT FORM 990 PRIOR TO ITS PRESENTATION TO THE FINANCE COMMITTEE THE FINANCE COMMITTEE WILL REVIEW THE FORM 990 AT ITS NEXT REGULARLY SCHEDULED MEETING OR CALL A SPECIAL MEETING TO REVIEW IT THE BOARD OF DIRECTORS WILL BE PROVIDED A COPY OF THE FORM 990 PRIOR TO FILING
	FORM 990, PART VI, SECTION B, LINE 12C	UPON JOINING THE BOARD OF DIRECTORS, ALL BOARD MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY THIS IS REVIEWED ANNUALLY THE BOARD CHAIR AND WASHINGTON STEM CEO WILL REVIEW THE MATTER TO DETERMINE IF A CONFLICT OF INTEREST EXISTS, OR ANOTHER OFFICER IF THE MATTER PERTAINS TO THE BOARD CHAIR OR THE CEO THE MEMBER HAVING A CONFLICT WILL BE ASKED TO DISCLOSE THE NATURE OF THE CONFLICT AND TO RECUSE THEMSELVES FROM ANY DECISION INVOLVING THE MATTER IN WHICH A CONFLICT EXISTS
	FORM 990, PART VI, SECTION B, LINE 15	SALARY FOR EACH POSITION WITHIN THE ORGANIZATION IS DETERMINED BY INDEPENDENTLY OBTAINED SALARY SURVEY DATA THE COMPENSATION OF THE CEO AND OTHER OFFICERS WAS LAST REVIEWED IN DECEMBER 2012
	FORM 990, PART VI, SECTION C, LINE 19	WASHINGTON STEM WILL MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON OUR WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	CHANGE IN ACCOUNTING PRINCIPLE RELATED TO GRANTS AND INVESTMENTS EXPENSE 1,926,915 LOSS ON SALE OF SECURITIES 224