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#### **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)

2012

OMB No 1545 1150

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Ā		the 2012 calendar year, or tax year beginning 7/01 , 2012, and ending 6/30	, 2013
B		of applicable Ses change	mployer identification number
<u> </u>	룩	·	51-0645383
F	Initial	return SCHOOLS E 1	elephone number
	Termi	14535 KING EDWARD CT	(703) 628-4537
	Amen	ded selver   ANNANDALE, VA 22003	Group Exemption
	Applic		lumber •
G	Acco	ounting Method X Cash Accrual Other (specify) ► H Check ►	X if the organization is <b>not</b>
1	Web	site: WWW.WAKS.INFO required to	attach Schedule B (Form
J	Tax-e	xempt status (check only one) — $X 501(c)(3)$ $501(c)(0)$ $(0)$	Z, or 990-PF)
K	Che		ind its gross receipts are
	norn	nally <b>not</b> more than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-posto	ard) may be required (see
_		uctions) But if the organization chooses to file a return, be sure to file a complete return.  lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	
	asse	ts (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	►\$ 107,146.
P		Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instru-	10,7110.
·		Check if the organization used Schedule O to respond to any question in this Part I	X
_	1	Contributions, gifts, grants, and similar amounts received	1 60,511.
	2	Program service revenue including government fees and contracts	2 46,635.
	3	Membership dues and assessments	3
	4	Investment income	4
	5 a	Gross amount from sale of assets other than inventory 5 a	,1
	t	Less cost or other basis and sales expenses 5b	<b>†</b>
	0	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5 c
	6	Gaming and fundraising events	
R E V	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	
V E	t	Gross income from fundraising events (not including \$ of contributions	7
N		from fundraising events reported on line 1) (attach Schedule G if the sum	1
E	1	of such gross income and contributions excèeds \$15,000)  6 b	4
	'	Less direct expenses from gaming and fundraising events  6 c	4
	0	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c).	6 d
		Gross sales of inventory, less returns and allowances 7 a	
		Less cost of goods sold 7b	<del>- </del> ,`
	1	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
	8	Other revenue (describe in Schedule O)	8
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9 107,146.
	10	Grants and similar amounts paid (list in Schedule O) RECEIVED	10 38,440.
	11		11 30,440.
E X P	12	Solories other componential and applicate to the solories of t	12 45.
P	13	Professional fees and other payments to independent contractors	13
Ņ	14	Occupancy, rent, utilities, and maintenance	14
\$107 \$107	15	Printing, publications, postage, and shipping OGDEN, UT	15
? ે	16	Other expenses (describe in Schedule O)  See Schedule O	16 66,815.
<b>19</b>	17	Total expenses. Add lines 10 through 16	
≥6 _	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18 1,846.
Z vš	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year	
子覧		figure reported on prior year's return)	19 4,937.
☐ s	20	Other changes in net assets or fund balances (explain in Schedule O)	20
SCAMNED JAN	21	Net assets or fund balances at end of year Combine lines 18 through 20	6,783.
₩BA	A Fo	Paperwork Reduction Act Notice, see the separate instructions.	Form <b>990-EZ</b> (2012)
<b>₹</b>			\ '
S		٠, ٠	\

Page 2

1 41	Check if the organization used Sche	dule O to respond to any que	estion in this Part II				X
			<del></del>	(A	) Beginning of year	•	(B) End of year
	Cash, savings, and investments				4,822.	22	6,783.
23	3	See Schedul	o 0			23	
24	Other assets (describe in Schedule O)	see schedul		<u> </u>	115.	24	
25	Total inhilities (describe un Cabadula O)		•	<u> </u>	4,937.	25	6,783.
	Total liabilities (describe in Schedule O)	aliamen (D) manata a sura a surata la	01)	<u></u>	0.	26	0.
	Net assets or fund balances (line 27 of c			<u> </u>	4,937.	27	6,783.
Par	t III Statement of Program Service Acco Check if the organization used Sch	emplishments (see the instrs to	r Part III.) Westion in this Part	ш		Real	Expenses uired for section 501
What i	s the organization's primary exempt purpose? See	a Schedule O	ucston in this rait	111	——————————————————————————————————————	(c)(3)	and 501(c)(4)
Desc	ribe the organization's program service ad	complishments for each of it	s three largest prod	ıram	services, as		nizations and section (a)(1) trusts, optional
mea: hene	ribe the organization's program service ac sured by expenses. In a clear and concise fited, and other relevant information for ea	e manner, describe the service	es provided, thè nữ	ímbe	r of persons		hers)
28	See Schedule O	acti program title					
	pec penedate o						
						- 1	
	(Grants \$ ) If th	is amount includes foreign gr	ants, check here			28 a	14,874.
29	TEXTBOOK AND RESOURCE SUP				<del>- · - · · · · · · · · · · · · · · · · ·</del>		11/0/1.
						Į	
	(Grants \$ 28,977.) If th	is amount includes foreign gr	ants, check here		·····································	29 a	8,402.
30	See Schedule 0						
					]		
		is amount includes foreign gr	ants, check here		<b>▶</b>	30 a	
31	Other program services (describe in Sche					_	
22		is amount includes foreign gr	ants, check here			31 a	
	Total program service expenses (add line					32	23,276.
<u>rar</u>	List of Officers, Directors, Check if the organization used Sch	Trustees, and Key Emp	ployees.List each or	ne eve	n if not compensated (s	ee the	instructions for Part IV )
	Oricek if the organization used oct	<del></del>	_		(d) Health benefits,	T	
	(a) Name and Title	(b) Average hours per week devoted to	(c) Reportable compens (Forms W-2/1099-MIS	(C)	contributions to employ benefit plans, and defer	/ee	(e) Estimated amount of other compensation
		position	(If not paid, enter -0-	•)	compensation		
	NG_MIN_LEE						
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	e President	•		ا ہ			
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BAA		TEEA0812L 0	3/14/13				Form <b>990-F7</b> (2012)

Par	tV Other Information (Note the Schedule A and personal benefit contract statement requirements in See Schedule the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V	ule	0	X
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,'		Yes	No
	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		Х
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35 a		$\vdash$
L	If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35 b		X
	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			<b></b>
	Did the organization undergo a liquidation, dissolution, termination, or significant	35 c		X
37 a	disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N  Enter amount of political expenditures, direct or indirect, as described in the instructions    37a   0.	36		X
	Did the organization file Form 1120-POL for this year?	37 b		X
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a		
b	If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38 b N/A			
39	Section 501(c)(7) organizations Enter			1
	Initiation fees and capital contributions included on line 9 . 39a N/A	`		
	Gross receipts, included on line 9, for public use of club facilities . 39b N/A	1 5m;-	ž,	
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.	-		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit		1	1
	transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b		х
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, 4955, and 4958	-	,	
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed	11	, ,	
е	by the organization  All organizations At any time during the tax year, was the organization a party to a prohibited tax		- '	
41	shelter transaction? If 'Yes,' complete Form 8886-T List the states with which a copy of this return is filed None	40 e		X
	The organization's books are in care of ► SEUNG MIN LEE  Located at ► 4535 KING EDWARD CT ANNANDALE VA Telephone no. ► (703)  ZIP + 4 ► 22003			
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)?  If 'Yes,' enter the name of the foreign country	42 b	Yes	No X
			,	
		, , _	و ۽ ،	4
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  At any time during the calendar year, did the organization maintain an office outside of the U S?	40 .		
С	If 'Yes,' enter the name of the foreign country	42 c		
43	Section 4947(a)(1) nonexempt charitable 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		► []	N/A N/A
44 a	Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 a		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	44 b		X
	Did the organization receive any payments for indoor tanning services during the year?	44 c		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	44 d		<u> </u>
	Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?	45 a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45 b		X

Page 4

`						Yes	No
<b>46</b> Did t	the organization engage, directly or indirectly distributed in the complete for public office? If 'Yes,' complete	ctly, in political campai	gn activities on behalf of	or in opposition to	46		1
Part VI					46		X
Fait VI	Section 501(c)(3) organizations All section 501(c)(3) organizations		auestions 17,19h ar	nd 52, and complet	te the tab	عما	
	for lines 50 and 51.	ons must answer	questions 47-430 ai	id 52, and complet	ie trie tab	163	
	Check if the organization used Schedule	e O to respond to any	question in this Part VI				П
						Yes	No
	the organization engage in lobbying activiti plete Schedule C, Part II	ies or have a section 5	01(h) election in effect d	uring the tax year? If 'Y	es,' 47		Х
	e organization a school as described in se	ction 170(b)(1)(A)(ii)?	If 'Yes.' complete Sched	ule E.	48		X
	the organization make any transfers to an				49 a		$\frac{x}{x}$
	es,' was the related organization a section	•			49 b		
	iplete this table for the organization's five floyees) who each received more than \$10						
епр	who each received thore than \$10		Thom the organization in	, , , , , , , , , , , , , , , , , , ,	T		
	(a) Name and litle of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimate other com		
None							-
				-			
<b>-</b>							
			<u> </u>		ļ		
	I number of other employees paid over \$1	·		•			
51 Com	plete this table for the organization's five I pensation from the organization. If there is	nighest compensated i s none, enter 'None '	ndependent contractors v	who each received more	e than \$100,	000 o	ıf
	Name and address of each independent contractor paid		<b>(b)</b> Type (	of service	(c) Comp	ensatio	n
None			<del>                                     </del>	<del></del>			
none_							
					,		
<del></del>							<del></del>
<b>d</b> Total	I number of other independent contractors	each receiving over \$	100,000	▶			
52 Did to	he organization complete Schedule A? No trable trusts must attach a completed Sche	ete: All section 501(c)(3	3) organizations and 4947	7(a)(1) nonexempt	► X Yes		
Under penalties	s of perjury, I declare that I have examined this return, incluand complete Declaration of preparer (other than of <u>fi</u> ce	ding accompanying schedules a	and statements, and to the best of	my knowledge and belief, it is			
				(/ 9/	1 (/		
Sign	Signature of officer			Date	7		
Here	SEUNG MIN LEE			President_			
	Type or print name and title		10.		T-14.1		
	Print/Type preparer's pame	Preparer's signature	Date	Check L if	TIN	_	
Paid	IVY H. LEE, CPA	•	PA	self employed   P	0062912	6	
Preparer Use Only	Firm's name ► Augustine S. Cho		O 4 W	Firm's EIN	54-1873	962	
OSE OIIIY			U <del>11</del> ¥¥				<del>,                                    </del>
	I Annandalo VA 2°	2003		I Phone no 1/11	3) 4 <u>4</u> 1-	7 <i>1 1 1</i>	
May the IR	Annandale, VA 22 S discuss this return with the preparer sho			Phone no (70	3) 941- ► X Yes		No

#### **SCHEDULE A** (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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.

WASHINGTON ASSOCIATION FOR KOREAN

Open to Public Inspection

		SCH001								645383		
<u>Part</u>	Ţ	Reason for Publi	c Charity Status (	All organizations m	ust co	mplete	this p	art.) S	ee ins	truction	ns.	
Гһе о	rgar			e it is: (For lines 1 throu								
1		A church, convention	of churches or assoc	ciation of churches desc	ribed in	section	170(b)(1	)(A)(i).				
2	П	A school described in	n section 170(b)(1)(A)	(ii). (Attach Schedule E	)							
3	П	A hospital or a coope	erative hospital service	e organization described	d in <b>sect</b>	tion 170	(b)(1)(A)	(iii).				
4	П	A medical research of	organization operated	in conjunction with a ho	spital di	escribed	ın secti	on 170(	b)(1)(A)	(iii) Ente	er the hospit	al's
	_	name, city, and state	· •									
5		An organization oper 170(b)(1)(A)(iv). (Coi	rated for the benefit of mplete Part II)	a college or university	owned o	or opera	ted by a	govern	mental	unit desc	cribed in sec	tion
6	П	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	X	in section 170(b)(1)(A	normally receives a substantial part of its support from a governmental unit or from the general public described <b>(vi).</b> (Complete Part II)									
8		A community trust de	escribed in section 17	<b>0(b)(1)(A)(vi).</b> (Complete	e Part II	)						
9		An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See <b>section 509(a)(2)</b> . (Complete Part III )										
10	П	An organization orga	nized and operated e	xclusively to test for put	olic safe	ty See	section !	509(a)(4	).			
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h											
		a Type I b	Type II c	Type III - Function	ally inte	grated	(	4 📗 .	Type III	– Non-fi	unctionally in	ntegrated
e	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)											
f		, , , ,	ceived a written deter	mination from the IRS t	hat is a	Type I,	Type II o	or Type	III supp	orting or	ganızatıon,	
g		Since August 17, 200	06, has the organization	on accepted any gift or	contribu	ution froi	m any of	f the foll	lowing p	ersons?		
											Ī	Yes No
		<ul><li>A person who obelow, the gove</li></ul>	directly or indirectly co erning body of the sup	ontrols, either alone or to oported organization?	ogether	with per	sons de	scribed	ın (ıı) aı	nd (III)	11 g (i)	
		_	er of a person describ	-							11 g (ii)	
			•	lescribed in (i) or (ii) ab	0402						<del></del>	
h		` '	• •	e supported organization							11 g (iii)	
		(i) Name of supported	(ii) EIN	(iii) Type of organization		s the	(v) Did yo	u notify	601	s the	(vii) Amount	of monetary
		organization	(1)	(described on lines 1-9 above or IRC section (see instructions))	organiz column (i your go	ation in i) listed in overning ment?	the organi column (i supp	zation in	organiz colur organize	ation in nn (i) ed in the S ?	(vii) Amount of monetary support	
					Yes	No	Yes	No	Yes	No		
A)												
В)												
C)												
D)												
						<u> </u>						
E)					ļ							
otal												
BAA	For	Paperwork Reductio	n Act Notice, see the	Instructions for Form 9	90 or 99	0-EZ.		:	Schedul	e A (For	m 990 or 99	0-EZ) 2012

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

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

Sec	tion A. Public Support					_	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	75,017.	76,064.	74,409.	50,647.	60,511.	336,648.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					·	0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	75,017.	76,064.	74,409.	50,647.	60,511.	336,648.
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)	,					0.
6	Public support. Subtract line 5 from line 4				,	, , , , , , , , , , , , , , , , , , ,	336,648.
Sec	tion B. Total Support					· · · · · · · · · · · · · · · · · · ·	
	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
7	Amounts from line 4	75,017.	76,064.	74,409.	50,647.	60,511.	336,648.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
11	Total support. Add lines 7 through 10				,		336,648.
12	Gross receipts from related activi	ties, etc (see instr	ructions)			12	49,783.
13	First five years. If the Form 990 is organization, check this box and	s for the organizat <b>stop here</b>	tion's first, second	, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
Sec	tion C. Computation of Pu	blic Support F	Percentage				
	Public support percentage for 201	· ·	• •	11, column (f))		14	100.00%
15	Public support percentage from 2	:011 Schedule A, I	Part II, line 14			15	100.00%
16 a	33-1/3% support test $-$ 2012. If the and stop here. The organization of	he organization di qualifies as a publ	d not check the bo icly supported org	ox on line 13, and anization	the line 14 is 33-	1/3% or more, che	eck this box
b	33-1/3% support test $-$ 2011. If the and stop here. The organization $\cdot$	e organization did qualifies as a publ	I not check a box of licly supported org	on line 13 or 16a, janization	and line 15 is 33-	-1/3% or more, ch	eck this box
17 a	10%-facts-and-circumstances tes or more, and if the organization in the organization meets the 'facts-	neets the 'facts-ar	nd-circumstances'	test, check this b	ox and stop here.	Éxplain in Part I\	/ how
b	10%-facts-and-circumstances tes or more, and if the organization norganization meets the 'facts-and	neets the 'facts-ar	nd-circumstances'	test, check this b	ox and stop here.	Explain in Part IV	
18	Private foundation. If the organization	ation did not chec	k a box on line 13	, 16a, 16b, 17a, o	r 17b, check this	box and see instri	uctions . •

Schedule A (Form 990 or 990-EZ) 2012 WASHINGTON ASSOCIATION FOR KOREAN

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box or	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 inle			_

Sec	tion A. Public Support	Stod Bolow, pieds		<u>'</u>						
	ndar year (or fiscal yr beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total			
1		(4) 2000	(3) 2003	(9) = 0.1	(6) 2311	(6) 2012	() Total			
	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									
5	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									
6	Total. Add lines 1 through 5						<u> </u>			
	Amounts included on lines 1, 2, and 3 received from disqualified persons									
t	a Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year									
c	: Add lines 7a and 7b									
8	<b>Public support</b> (Subtract line 7c from line 6.)									
	tion B. Total Support	<del></del>	T			,				
Calen	dar year (or fiscal yr beginning in) >	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	(d) 2011	<b>(e)</b> 2012	(f) Total			
10 a	Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  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 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 Ins 9, 10c, 11, and 12)									
	First five years. If the Form 990 is organization, check this box and	_ <u></u>		, third, fourth, or	fifth tax year as a	section 501(c)(3)	<b>→</b> □			
	tion C. Computation of Pu						·			
15	Public support percentage for 20	15	%							
16						16	%			
	tion D. Computation of Inv									
17	Investment income percentage for	` '	``	•	nn (f))	17	%			
18	Investment income percentage fr					18	%			
	<b>33-1/3% support tests</b> – <b>2012.</b> If is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	s a publicly suppor	ted organization	▶ [_			
	33-1/3% support tests — 2011. If fine 18 is not more than 33-1/3%,	, check this box a	nd <b>stop here.</b> The	organization qua	lifies as a publicly	supported organ	1/3%, and Ization			
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									

	A (Form 990 or 990-EZ) 2012	<u>washington</u>	_ASSOCIATIO	ON FOR KOREAN	51-0645383	Page 4
Part IV	Supplemental Information Part II, line 17a or 17b; (See instructions).	1. Complete this and Part III, Ii	s part to provid ne 12. Also c	le the explanations omplete this part	required by Part II, line 10; for any additional information.	
				. <b></b>		
				· <b></b>		
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			<b>-</b>			<b>-</b>
		·				
		. – – – – –				

#### **SCHEDULE 0** (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization and account of the organization and the organiz	Employer identification number
Name of the organization WASHINGTON ASSOCIATION FOR KOREAN SCHOOLS	51-0645383
Form 990-EZ, Part III - Organization's Primary Exempt Purpose	
TO PROVIDE OPPORTUNITIES FOR IMPROVING KOREAN LANGUAGE	AND CULTURAL PROGRAMS AND
DIALOGUE AMONG KOREAN SCHOOL EDUCATORS AND TO THE PUBLI	<del></del>
Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomp	<u>plishments</u>
DEVELOPMENTS FOR KOREAN SCHOOLS AND TEACHERS:	
<b></b>	
1) HELD TEACHER'S WORKSHOP/CONFERENCES IN FALL 2012 & SP	PRING 2013.
TEACHERS AND STAFFS SHARED VARIOUS INFORMATIVE AND EDUC	ATIONAL LECTURES AND
SEMINARS.	
2) JOINED NECTFL (NORTHERN CONFERENCE ON THE TEACHING OF	
FOR THE FOREIGN EDUCATORS IN SPRING 2013.	
Form 990-EZ, Part III, Line 30 - Statement of Program Service Accomp	plishments
HELD VARIOUS EDUCATIONAL SUPPORTING EVENTS FOR KOREAN S	
ACCOMPLISHMENTS INCLUDE THE TEACHERS' APPRECIATION NIGH	T, PUBLIC SPEAKING &
WRITING COMPETITIONS, AND MUSICAL & CULTURAL PROGRAM RE	
Form 990-EZ, Part V - Regarding Transfers Associated with Personal Bend	efit Contracts
(a) Did the organization, during the year, receive any	
indirectly, to pay premiums on a personal benefit contr	
(b) Did the organization, during the year, pay premium	
indirectly, on a personal benefit contract?	No No

2012		upplemental Information	n	Page 2
· 	WASHINGTON A	ASSOCIATION FOR KOREAN SCHOOLS		51-0645383
Form 990-EZ, Part Other Expenses  Class Presentat Depreciation Freight Shippin Meetings & Conf NECTFL - Northe Public Speaking Recital Special Event f Teacher Appreci Teacher Worksho Text Books Writing Competi	ion  g erences ast Conference Competition or Fundraising ation Night p/Conference		\$ Total \$	1,102. 115. 357. 3,123. 4,937. 4,861. 3,536. 11,324. 14,995. 9,937. 8,045. 4,483. 66,815.
Form 990-EZ, Part l Other Assets	I, Line 24			
Furniture and F	ixtures	Boundary Bou	eginning 115. \$ 115. \$	Ending 0. 0.

2012

# Federal Supporting Detail WASHINGTON ASSOCIATION FOR KOREAN SCHOOLS

Page 1

51-0645383

Stmt. of Functional Expenses (990) Payments to affiliates [O]

NAKS - 7613 98th Ave Ct SW, Lakewood, WA 98498

 \$
 38,440.

 \$
 38,440.

6/30/13

## 2012 Federal Book Summary Depreciation Schedule WASHINGTON ASSOCIATION FOR KOREAN

Page 1

Client KOR	SCHOOLS						51-0645383			
1/08/14									11 22AM	
No. Description Form 990/990-PF	Date <u>Acquired</u>	Date Sold	Cost/ Basis	Bus Pct.	Cur 179/ SDA	Prior 179/ SDA/ Depr	<u>Method</u>	Life	Current Depr.	
Furniture and Fixtures										
1 OFFICE FURNITURES	7/01/07		2,000			1,885	200DB HY	7_	115	
Total Furniture and Fixtures			2,000		0	1,885			115	
Total Depreciation			2,000		0	1,885		_	115	
Grand Total Depreciation			2,000		0	1,885		_	115	