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Form **991**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2012

Open to Public

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For the 2012 calendar year, or tax year beginning 2012, and ending September 1 August 31 20 13 D Employer identification number C Name of organization Lake Washington Education Association Check if applicable Doing Business As Address change 91-0820344 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Name change Initial return 212 425-822-3388 City, town or post office, state, and ZIP code Terminated Amended return Kirkland, WA 98033 G Gross receipts \$ 565,160 Application pending F Name and address of principal officer H(a) Is this a group return for affiliates? Yes No **Kevin Teelev** 16817A 6th Ave W. Lvnnwood, WA 98037 H(b) Are all affiliates included? Yes No. If "No," attach a list (see instructions) Tax-exempt status: 501(c)(3) Website: ▶ www.lakewashingtonea.org H(c) Group exemption number ▶ Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation M State of legal domicile 1966 WA Briefly describe the organization's mission or most significant activities: Negotiate for improved compensation, benefits, and working conditions for members at local, state & national levels; maintain contracts, arbitrate, and conduct grievance procedures; iftes & Governance and advocate for the interests of the teaching profession. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 1,593 4 Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 3 Total number of volunteers (estimate if necessary) 6 150 Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a 0 Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h). 607,455 533,616 Program service revenue (Part VIII, line 2g) 9 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 25,359 31,544 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 632,814 565,160 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 14 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 259.864 261,560 Professional fundraising fees (Part IX, column (A), line 11e) . . . 16a 400 4: 805 (VA) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 265,474 237,071 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 525,338 498,631 Revenue less expenses. Subtract line 18 from line 12-19 107,476 66,529 **Beginning of Current Year End of Year** Total assets (Part X, line 16) 20 389,698 456,728 Total liabilities (Part X, line 26)? SO 21 Net assets or fund balances. Subtract line 21 from line 205 389,698 456,728 Signature Block Part II Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Date President Here Type or print name and title Print/Type preparer's name Preparer's signature Date Paid Check I If self-employed Preparer Firm's EIN ▶ Firm's name **Use Only** Phone no Firm's address ▶ May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2012)

Part		_
		<u>~</u>
1	Briefly describe the organization's mission:	
	Negotiate for improved compensation, benefits, and working conditions for members at local, state, and national levels; maintain	
	contracts, arbitrate,and conduct grievance procedures; and advocate for the interests of the teaching profession.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	٥
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
	services?	0
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	.
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	
	the total expenses, and revenue, if any, for each program service reported.	13,
4a	(Code:) (Expenses \$ 78,732 including grants of \$ 0) (Revenue \$ 1,432)	_
	Bargaining: Contract negotiations on behalf of the members. Expenses include training, release time, substititues, meals, and	
	stipends for the time and effort of the members of the association team.	
4b	(Code:) (Expenses \$ 32,679 including grants of \$ 0) (Revenue \$ 629)	_
	National Education Association Representative Assembly: Annual business meeting of the national organization at which delegate	2
	determine the directions of the organization or the next year and advocate for the interests of the teaching profession in areas of	 -
	compensation, benefits, and working conditions, as well as funding for public education.	
	(Outlier) / (Durant de la company)	
4c		
	Washington Education Association Representative Assembly: Annual business meeting of the state organization, at which delegated the state of the disease of the state organization at which delegated the state of the state organization at which delegated the state of the state organization at which delegated the state organization at the state or	<u>}S</u>
	determine the direction of the organization for the next year and advocate for the interests of the teaching profession in areas of	
	compensation, benefits, and working condations, as well as state funding for public education.	
4d		
	(Expenses \$ 46,351 including grants of \$ 0) (Revenue \$ 9,292)	
4e	Total program service expenses ► 166,481	

Part 1	V Checklist of Required Schedules		_	
			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	1		"
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		~
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		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	-	
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	,	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
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		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		~
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		~
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d		11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		·
		11f		,
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII			~
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.	12a		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	~
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		7
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		,
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.			,
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	15		,
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)		_	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	_	•
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		~
	If "Yes," complete Schedule G, Part III	19		~
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
Q	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	١ ١	١

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Part	Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	res	NO
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		v
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		v
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		,
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		V
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		V
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		
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		
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		
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		v v
c	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		~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		>
31	conservation contributions? If "Yes," complete Schedule M	30		~
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		~
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? <i>If "Yes," complete Schedule R, Part I </i>	33		~
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		>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
ь	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	35h		~

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

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

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

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Part V	Statements	Regarding	Other IRS F	ilings and	Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	<u> </u>	<i>[</i> .	
4			X88	249
па b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-		
C	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			į
Ū	reportable gaming (gambling) winnings to prize winners?	1-		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		Ė	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
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		~
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		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		/
b		- Oa		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Li	~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		~
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		~
d e	If "Yes," indicate the number of Forms 8282 filed during the year		_ /	*
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 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?	8		~
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		~
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		~
10	Section 501(c)(7) organizations. Enter:			
a h	Initiation fees and capital contributions included on Part VIII, line 12			
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter:			
'' a	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.)	<u> </u>		
12a	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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O.			
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	. 1	1	
С	100 0			
l4a	Enter the amount of reserves on hand	145		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14a 14b	\dashv	<u> </u>
	100, Indo it mod a form the to report these payments: If two, provide an explanation in scriedule O .		990	(2012)
				(~~ · · · /

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
	Check if Schedule O contains a response to any question in this Part VI			
Secti	ion A. Governing Body and Management			
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.		Yes	No
b 2	Enter the number of voting members included in line 1a, above, who are independent . 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		V
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		_
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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?	4 5 6	V	\(\times \)
ь 8	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		v
a b 9	The governing body?	8a 8b	V	
Secti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. ion B. Policies (This Section B requests information about policies not required by the Internal Rever	9	ode l	
0000	ion b. Folloids (This decition b requests information about policies not required by the internal never	100 00	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		v
11a b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	11a 12a 12b	» i	V
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		
13 14 15	Did the organization have a written whistleblower policy?	13	~	
a b	The organization's CEO, Executive Director, or top management official	15a 15b		ν ν
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		V
	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		
	Let the states with which a copy of this Form 000 is required to be filed >			
17 18	List the states with which a copy of this Form 990 is required to be filed n/a Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)
19 20	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 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		•	oolicy,
	organization: ► Sheila Hagerman, 10604 NE 38th Place, Suite 212, Kirkland, WA 98033 (425-822-3388)			

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

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 no	r any relate	d org	anız	atic	n c	ompe	nsa	ited any curren	t officer, director	r, or trustee.
					C)					
(A) Name and Title	(B) Average			neck		than o		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any					or/trus	tee)	compensation from	compensation from related	amount of other
	hours for related organizations below dotted line)		Institutional trustee Individual trustee		Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1)Kevin Teeley	40									
President				~				-0-	0-	
(2)Matthew Breysse	2									
Vice President	<u> </u>			~				-0-	0-	0-
(3)Maryziel Galarpe	2								,	
Primary Rep - Board of Directors		~						0-	-0-	0-
(4)Kenneth Egawa	2									
Intermediate Rep - Board of Directors		~				_		-0-	-0-	0-
(5)Peggy Solum	2			}						
Middle School Rep - Board of Directors		-						-0-		0-
(6)David McGibney	2									
High School Rep - Board of Directors		~						-0-		0-
(7)Geraldine Pappas	2									
Special Services Rep - Board of Directors		~	_			_		-0-	-0-	0-
(8)Marilyn Hargraves	2									
Specialist Rep - Board of Directors		~						-0-	-0-	0-
(9)Ernest Young	2									
Ethnic Minority Rep - Board of Directors								0-	-0-	0-
(10)Sheila Hagerman	40		\							
Administrative Assistant					~			79,539	-0-	0-
(11)	<u> </u>									
(12)						<u> </u>		-		
(13)						_				
(14)										

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	office office or directo	ot cho unless	s pe	more rson	than of the state	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation fror related organizations (W-2/1099-MISC)		Estimamou oth comper from organia and re	nated unt of ner nsation n the zation elated
(15)							.eg.				_		
(16)											-		
(17)									_				
(18)												<u></u>	
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(20)				\dashv	\dashv	_							
(24)				\dashv	-						<u> </u>		
(22)					_								
(23)					-						<u> </u>		
(24)					ļ					<u> </u>	-		
(25)											-		
1b c	Sub-total	VII, Sectio	n A			•		>	79,539 -0-	-	1	-	-0 -0
<u>d</u>	Total (add lines 1b and 1c)	not limited	to th) wi	79,539 no received mo				-0
3	Did the organization list any former of employee on line 1a? If "Yes," complete S	ficer, direct	tor, o					mp	loyee, or high	est compensat	ed	3	res No
4	For any individual listed on line 1a, is the organization and related organizations	sum of rep greater tha	oortab an \$1	le c 50,0	om 1001	pen ? <i>If</i>	satio	n ar s," (nd other comp	ensation from tedule J for su	he ch		
5	individual									atıon or ındıvidı	ual	4	V
Section	for services rendered to the organization? on B. Independent Contractors	o If "Yes," c	omple	ete S	Sch	edu	le J fo	or s	uch person .	· · · · · ·		5	~
1	Complete this table for your five highest of compensation from the organization. Replyear.	compensate ort comper	ed ind	epei n foi	nde r the	ent d	contra	acto ar y	ers that receive	d more than \$1 h or within the o	00,00 organi	0 of zatior	i's tax
	(A) Name and business addi	ress					Ĭ	-	(B) Description of se	ervices	Com	(C) npensat	ion
n/a													
									-				

Part VIII	Sta	te	m	en	t	of	R	eve	nue
				_		_	_	_	

		Check if Schedule O contains a response	onse to any ques	tion in this Part V	III		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns 1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	533,616]	
s, (Am	С	Fundraising events 1c	0				
Gift	d	Related organizations 1d	0				
ns, i	е	Government grants (contributions) 1e					
er S	f	All other contributions, gifts, grants,					
jë K		and similar amounts not included above 1f	lo				
onti	g	Noncash contributions included in lines 1a-1f \$	0				
	<u>h</u>	Total. Add lines 1a-1f	Business Code	533,616		ļ	
Program Service Revenue	0-		business Code				
eve	2a	n/a				 	
Se F	Ь						
Ž	C d				_ _	 	
Š	ū					 	
Jran	- F	All other program service revenue .					
ĝ	9	Total. Add lines 2a–2f				<u> </u>	
	3	Investment income (including divid				Τ*	<u> </u>
				ا			İ
	4	Income from investment of tax-exempt be	ond proceeds ▶	- - 4			-
	5	Royalties	•	a		 	 -
		(i) Real	(ii) Personal				
	6a	Gross rents		· **	*		
	b	Less: rental expenses		* *	*	, ,	* * *
	С	Rental income or (loss)		* *	•	, ,	* *
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of (i) Securities	(ii) Other		**	*	* 4
	_	assets other than inventory		l			
	b	Less: cost or other basis		* '			
		and sales expenses .	ļ. <u>.</u>	,	*	ì	
	C	Gain or (loss)		* *	*	<u> </u>	7 *
	d	Net gain or (loss)	· · · · · ·	<u> </u>			
enne	8a	Gross income from fundraising events (not including \$, ,	ŧ		*
Other Revenue		of contributions reported on line 1c). See Part IV, line 18 a					
the	h	Less: direct expenses b					
0	C	Net income or (loss) from fundraising					
	1	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming act	ıvities ▶	0			
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inv		0			
		Miscellaneous Revenue	Business Code				
	11a		611710	4,112		ļ	
	b		611710	9,291		 	
	٠ د	Equipment Maintenance All other revenue	611710	10,829		 	
	d e	Total. Add lines 11a–11d	•	7,312		 	
	12	Total revenue. See instructions.		31,544 565,160		 	
				, 505, 16U		I	1

	IX Statement of Functional Expenses				
Section	n.501(c)(3) and 501(c)(4) organizations must con		 _	ns must complete co	olumn (A).
	Check if Schedule O contains a respon			<u> </u>	<u> </u>
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	167,744			
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 8	Other salaries and wages	17,069			
•	• • • • • • • • • • • • • • • • • • • •	20,621			
9 10	Other employee benefits	48,328 7,798			
11	Fees for services (non-employees):	7,796		 	_
''a	Management				
ь	Legal				
C	Accounting	1,590		†	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		**	, v v	
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	16,176			· -
14	Information technology				
15	Royalties				
16	Occupancy	30,706			
17	Travel			-	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	53,175			
20	Interest				
21	Payments to affiliates	·			
22	Depreciation, depletion, and amortization .	5,784			
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Program Costs	112,986			
b	Office Costs	16,654		 	
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	498,631			
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				

Р	art X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part	X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	351,170	1	417,94
	2	Savings and temporary cash investments	38,528		38,78
	3	Pledges and grants receivable, net	a	3	
	4	Accounts receivable, net	d	4	
	5	Loans and other receivables from current and former officers, directors,		,	
	1	trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	a	_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			
ets	i	organizations (see instructions). Complete Part II of Schedule L	0	6	
Assets	7	Notes and loans receivable, net	0	7_	
⋖	8	Inventories for sale or use	0	_8_	
	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation 10b	a	10c	3
	11	Investments—publicly traded securities	a	11	
	12	Investments—other securities. See Part IV, line 11	0	12	
	13	Investments—program-related. See Part IV, line 11	0	13	
	14	Intangible assets	0	14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	389,698		456,728
	17	Accounts payable and accrued expenses	0	17	
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
/A	21	Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors,	0	21	
ţje	22	trustees, key employees, highest compensated employees, and			
Ē	!	disqualified persons. Complete Part II of Schedule L		22	
Liabilities	23	Secured mortgages and notes payable to unrelated third parties		23	
_	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
	ļ	of Schedule D	d	25	
	26	Total liabilities. Add lines 17 through 25	0	26	
G		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	, .		
Ş	ļ	complete lines 27 through 29, and lines 33 and 34.			
ilan	27	Unrestricted net assets		27	
8	28	Temporarily restricted net assets		28	
īnd	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds	n	30	
sel	31	Paid-in or capital surplus, or land, building, or equipment fund	a	31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
det	33	Total net assets or fund balances	389,698	33	456,728
Z	34	Total liabilities and net assets/fund balances	389 698		456 728

		•
orm	990	(2012)

Page **12**

Pari	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1	_	565,160
2	Total expenses (must equal Part IX, column (A), line 25)	2		498,631
3	Revenue less expenses. Subtract line 2 from line 1	3		66,529
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	_	389,695
5	Net unrealized gains (losses) on investments	5		0
6	Donated services and use of facilities	6		0
7	Investment expenses	7		0
8	Prior period adjustments	8		0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10		456,224
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>	<u> </u>	
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plaın in	-	Yes No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both:		2a	V
b	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	 ed on a	2b	✓ * * * * * * * * * * * * * * * * * * *
С	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of the audit, review, or compilation of its financial statements and selection of an independent account of the organization changed either its oversight process or selection process during the tax year, expenses.	untant?	2c	· · ·
_	Schedule O.			* *
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		3a	<u>, </u>
ь 	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	
			Form	n 990 (2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.	<u> </u>	F	
	of organization			Employer ide	ntification number
	Vashington Education Asso			<u> </u>	91-0820344
Part		e organization is exempt und	·		organization.
1	•	the organization's direct and indir		•	^
2					\$
3	Volunteer hours				
Part	I-B Complete if th	e organization is exempt und	ler section 501	(c)(3).	
1	Enter the amount of any	excise tax incurred by the organiz	ation under section	on 4955 🕨 🤄	\$
2		excise tax incurred by organizatio			\$
3	If the organization incurre	ed a section 4955 tax, did it file Fo	orm 4720 for this y	/ear?	Yes No
4a	Was a correction made?				🗌 Yes 🔲 No
<u>b</u>	If "Yes," describe in Part		·		
Part		e organization is exempt und			1(c)(3).
1		ly expended by the filing organi		<u>.</u>	
					S
2		filing organization's funds contri			
_	•	vities			5
3	•	expenditures. Add lines 1 and 2		•	
4		n file Form 1120-POL for this year			
5		ses and employer identification nu			
		ents. For each organization listed,			
		ontributions received that were pro fund or a political action commit			
	as a separate segregated	Tund or a political action committee		That space is needed, prov	Total mormation in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
					delivered to a separate
					political organization If none, enter -0
			 	<u> </u>	
(1)					
(2)					
(3)					
	·		 	 	
(4)		ļ			
			<u> </u>		
(5) 					
(6)		ļ			

	٠,			
Schedule C	(Form	990 or	990-EZ)	2012

Page 2

						i age 🛌
Pa	ort II-A Complete if the organization section 501(h)).	on is exempt u	ınder section 50	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ▶ ☐ 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).					
В	Check ► ☐ if the filing organization ch				•	
<u>-</u>		bying Expendite		ioi provisions e	(a) Filing	(b) Affiliated
	(The term "expenditures" m)	organization's totals	group totals
	1a Total lobbying expenditures to influence			·	 	
	b Total lobbying expenditures to influence	•		•		
	c Total lobbying expenditures (add lines	_	• •			
	d Other exempt purpose expenditures .	=				
	e Total exempt purpose expenditures (ad					
	f Lobbying nontaxable amount. Enter		•			
	columns.		•			
	If the amount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:		
	Not over \$500,000		ount 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		10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		5% of the excess of			
	Over \$17,000,000 \$1,000,000.					
	g Grassroots nontaxable amount (enter 2	5% of line 1f)				
	h Subtract line 1g from line 1a. If zero or l	ess, enter -0-				
	i Subtract line 1f from line 1c. If zero or le	ess, enter -0-				
	j If there is an amount other than zero reporting section 4911 tax for this year		1h or line 1i, did	-		Yes No
	(Some organizations that m	ade a section 5	Period Under Sec 01(h) election do ctions for lines 2a	not have to com		•
	Lobbyin	g Expenditures	During 4-Year Av	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
	2a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))		*		*	
	c Total lobbying expenditures					
_	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2012

	(election under section 501(h)).			(b)		
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes	No	Aı	Amount	
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?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u></u>				
С	Media advertisements?					
d	Mailings to members, legislators, or the public?	<u> </u>	!			
e	Publications, or published or broadcast statements?	<u> </u>	├			
f -	Grants to other organizations for lobbying purposes?	<u> </u>	}			_
g	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		-			
h i	Other activities?		 - -			-
i	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)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	!				
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).)(5),	or se	ction		
					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?			2	~	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	L	~
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes."				line :	3, is
1 2°	Dues, assessments and similar amounts from members	s of	1		53	33,616
а	Current year		2a			
b	Carryover from last year	·	2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues a		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbeard and relative post type?	ying				
5	and political expenditure next year?	•	4			0
Par		<u> </u>	5			
Comp	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; art II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	Part	II-A (at	filiated	group	0
		<i>-</i>	••		- -	
			••			•
					·	

Schedule C (Fo	m 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information (continued)	

		······································
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••		
		••••••••••••••••

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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.

Inspection

Employer identification number

Lake Washington Education Association	91-0820344			
Part III, 4d Additional Programs include:				
Jump Start Rebate - rebate of registration fee to members on completion of National Board prep class	(\$5,835)			
Scholarship Fund - scholarship for graduating senior going into the field of education (\$1,000)				
New Teacher - beginning of year information and end of year dinner for members /new teacher program	n (\$2,340)			
Lake Washington School Foundation - annual contribution to fund activities of the local school foundation	tion (\$1,000)			
Read Across America - funds to school librarians to pay for activities relating to this even to promote r	reading (\$4,280)			
Non-Chargeable - release time/substitutes to attend state meetings & trainings, support of local levy co	ommittee (\$8,035)			
PTSA - materials for donated fundraiser, tickets to annual Founder's Day luncheon (\$250)				
Retirement Recognition - award for retiring members (\$4,000)				
B Team Program - clock hour program for building representatives (\$560)				
Alliance Caucus - speakers/presentors for member workshops, workshop expenses (\$905)				
Misc Committee - release time to attend district's Benefits Advisory Committee (\$98)				
Member Workshops - Various training/inservice for members on education strategies/instruction (\$3,7	71)			
Bargaining - contract negotiations expenses including training, release time, substitutes, meals, stiper	nd (\$78,469)			
Member Engagement - funds for building reps to use for incentives to get members to attend meetings	or participate in events (\$2,453)			
Part VI, Section 9				
Matthew Breysse, Vice President, 10644 NE 154th Place, Bothell, WA 98011				
Maryziel Galarpe, Primary Rep - Board of Directors, 2325 170th Street SE, Bothell, WA 98012				
Kenneth Egawa, Intermediate Rep - Board of Directors, 8624 NE 138th Street, Kirkland, WA 98034				
Peggy Solum, Middle School Rep - Board of Directors, 23946 34th Ave SE, Bothell, WA 98021				
David McGibney, High School Rep - Board of Directors, 219 221st Ave NE, Sammamish, WA 98074				
Geraldine Pappas, Special Services Rep - Board of Directors, PO Box 64, Medina, WA 98039				
Marilyn Hargraves, Specialist Rep - Board of Directors, 4637 192nd Drive NE, Sammamish, WA 98074				
Ernest Young, Ethnic Minority Rep - Board of Directors, 26927 136th Place SE, Kent, WA 98042				

Name of the organization	Employer identification number
_ake Washington Education Association	91-0820344
Part VI - Section C 19:	
Documents and financial statements are kept in the Lake Washington Education A	ssocation office. Anyone needed access can contact the
ake Washington Education Association for assistance.	
are washington Education Association for assistance.	
	·
,	
	·