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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

2012

Open to Public Inspection

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

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

and ending AUG 31, 2013 A For the 2012 calendar year, or tax year beginning SEP 1 2012 C Name of organization Check if applicable D Employer identification number Address change EVERETT PUBLIC SCHOOLS FOUNDATION Name change 91-1329342 Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-P.O. BOX 3112 (425)385-4694 Amended return 2,176,762. City, town, or post office, state, and ZIP code G Gross receipts \$ Applica-EVERETT, WA 98213 H(a) Is this a group return pending F Name and address of principal officer KRISTIE DUTTON Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? Yes No Tax-exempt status X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or If "No." attach a list (see instructions) J Website: ► WWW.EPSFOUNDATION.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Other > Association Year of formation: 1985 M State of legal domicile; WA Part I Summary Briefly describe the organization's mission or most significant activities TO MAKE A DIFFERENCE IN Activities & Governance EDUCATION APART FROM STATE FUNDING, PRIMARILY THROUGH COMMUNITY 2 Check this box \(\bigs \) if the organization discontinued its operations or disposed of more than 25% of its net assets 27 Number of voting members of the governing body (Part VI, line 1a) 27 Number of independent voting members of the governing body (Part VI, line 1b) 4 3 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 25 6 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable_income_from Form 990-T, line 34 7b RECEIVED **Prior Year Current Year** 275,617. Contributions and grants (Partiville-line-1h) 245,806 RS 36,509 36,360. Program service revenue (Part VIII- line 2g) Investment income (Part VIII) column (A), lines 3, 4, and 7d) 36,326. 105,922. 10 31,776. 31,219 Other revenue (Part VIII, column (A), lines-5, 6d, 8c, 9c, 100, and 11e) 449,675. Total revenue - add lines 8 through (1) (mas requal Part VIII, column (A), line 12) 349,860. 255,079. Grants and similar amounts paid (Part IX, column (A), lines 1:3) 163,191 0. Benefits paid to or for members (Part IX, column (A), line 4) 0. 103,225. 86,504. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 46,416. **b** Total fundraising expenses (Part IX, column (D), line 25) 44,005 41,975. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 400,279. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 293,700. Revenue less expenses Subtract line 18 from line 12 56,160. 49,396. 19 Beginning of Current Year **End of Year** 1,354,804 1,371,245. 20 Total assets (Part X, line 16) ,649. 4,363. 21 Total liabilities (Part X, line 26) 353,155. 366,882. Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, 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. Mristii / Zulan 0/18/14 Signature of officer Date Sign KRISTIE DUTTON. EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Preparer's Print/Type preparer's name 23 P00063274 Paid RICHARD L. ANDERSON, CPA sett-employed 26-2293730 Firm's name | HASCAL SJOHOLM AND COMPANY Firm's EIN Preparer Use Only Firm's address PO BOX 1188

32001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

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

EVERETT, WA 98206-1188

X Yes No Form **990** (2012)

Phone no. (425) 252-3173

Form_		<u>-1329342 </u>	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
	Briefly describe the organization's mission	DDTMADT	T 17
	TO MAKE A DIFFERENCE IN EDUCATION APART FROM STATE FUNDING,		
	THROUGH COMMUNITY INVOLVEMENT AND PRIVATE DONATIONS-BOTH CO	RPORATE	AND
	INDIVIDUAL.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Ves	X No
	·		
	If "Yes," describe these new services on Schedule O.		X No
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	∟ Yes	LAL No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured as the control of the	ared by expenses	3
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	total expenses,	and
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 252,521. including grants of \$ 193,063.) (Revenue \$	36.	360.)
74	SCHOOL PROGRAMS, CLASSROOM GRANTS, TUITION GRANTS, VARIOUS		
		WMWND9 @	
	SPECIFIC PROGRAMS		
			<u> </u>
4b	(Code) (Expenses \$ 62,016. including grants of \$ 62,016.) (Revenue \$		<u> </u>
75	SCHOLARSHIPS		 ′
	SCHOLANSHIPS		
4c	(Code) (Expenses \$		<u> </u>
	, (1,000)		
			
			
4d	Other program services (Describe in Schedule O)		
-74		١	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 314,537.		
<u>4e</u>	Total program service expenses ► 314,537.	- . (990 (2012)
		⊢orm ?	っつい (ソロ1ン)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complète Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		<u>X</u>
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		<u>X</u>
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		<u>X</u>
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		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			7.5
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
	Schedule D, Part III	8		<u>X</u>
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?			v
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10	- 22	
•	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	Х	
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		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	ļ
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	· · · · · · · · · · · · · · · · · · ·	46:		v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		X
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	17		X
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	X	
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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	gan	(2012)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			_
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		ļ	
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified		ŀ	1
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			}
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		ł	ĺ
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	 	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	If "Yes," complete Schedule N, Part I	31	<u> </u>	<u> X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		v
00	Schedule N, Part II	32	1	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		X
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part 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	24	ł	x
05-	Part V, line 1	34 35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	334	<u> </u>	 ^
D	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		
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	350		
36		36		X
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	 	- 23
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	-	†	 **
38	Note. All Form 990 filers are required to complete Schedule O	38	x	
	14015. Fair Form 500 more and required to complete Contessio 5			(2012)
				,

<u> </u>	ii 165, iia5 it ii60 a i Oili 120 to iepoit tii656 payments i ii 140, provide an explanation in ocheodic o	_	n 990	(2012)
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
С	Enter the amount of reserves on hand			
	organization is licensed to issue qualified health plans		1	
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	Note. See the instructions for additional information the organization must report on Schedule O			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	<u> </u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	amounts due or received from them)			
a	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
11	Gross income from members or shareholders			
	Section 501(c)(12) organizations. Enter	1		1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
		30		
	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		x
		-		- 42
	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		x
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h_		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h	ļ	X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	If "Yes," indicate the number of Forms 8282 filed during the year	70		Y
	to file Form 8282?	7c		X
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			- T
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	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		X
	Organizations that may receive deductible contributions under section 170(c).			٠,,
	were not tax deductible?	6b		
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	any contributions that were not tax deductible as charitable contributions?	6a		X
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	₌		v
	If "Yes," enter the name of the foreign country.			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	,		v
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			v
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u>X</u> _
	filed for the calendar year ending with or within the year covered by this return 2a 3	_		7.5
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	(gambling) winnings to prize winners?	1c	X	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
1a	Enter the number reported in Box 3 of Form 1096. Enter ·0· if not applicable			
			Yes	No
	Check if Schedule O contains a response to any question in this Part V			<u> </u>

232005 12-10-12

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

	Check if Schedule O contains a response to any question in this Part VI						\mathbf{x}
Sec	tion A. Governing Body and Management						
	•					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		27			
	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	1b		27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other				
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under t	he dire	ct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?				3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?		4		_X_
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		1	5		X
6	Did the organization have members or stockholders?				6		<u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or				
	more members of the governing body?			-	7a		X
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or	ļ			
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by tl	ne following:	ľ			1
а	The governing body?			ļ	8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b_	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			1	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenu	e Code)				
				г		Yes	No
	Did the organization have local chapters, branches, or affiliates?				10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such	chapte	rs, affiliates,	ł			i
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		_
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy befo	ore filing the forr	n?	11a	X	ļ
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					37	ļ
_	Did the organization have a written conflict of interest policy? If "No," go to line 13		0	}	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			-	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	'Yes," c	escribe			v	
	in Schedule O how this was done				12c	X	Х
13	Did the organization have a written whistleblower policy?			ł	13	v	^
14	Did the organization have a written document retention and destruction policy?			ļ	14_	<u>X</u>	
15	Did the process for determining compensation of the following persons include a review and appro		naepenaent				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision.	1 5			1F-	х	
a	The organization's CEO, Executive Director, or top management official				<u>15a</u> 15b	X	-
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				130		
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement	with a				ļ
.Ja	taxable entity during the year?	-,			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	iate its	participation		. 74		† <u></u>
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org						
	exempt status with respect to such arrangements?				16b		İ
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ►WA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Sec	tion 501(c)(3)s (only) a	vailat	le	
	for public inspection. Indicate how you made these available. Check all that apply	,	, -	• • •			
	Own website X Another's website X Upon request Other (expla	ın ın So	hedule O)				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents,		•	y, and	d finar	ncial	
, ,	statements available to the public during the tax year		•	•			
20	State the name, physical address, and telephone number of the person who possesses the books	and re	cords of the org	anızat	ion.	.	
	KATHY MCKENZIE - 425-385-4694						
	P.O. BOX 3112, EVERETT, WA 98213						
23200	6				Forn	990	(2012

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter 0 in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

- 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

A A A A A B A A B A A	(A)		l	111120			прег	1341			(E)
Comparison Com	(A)	(B)							(D)	(E)	(F)
Very	Name and Title			not c	heck	more	than		· •	'	
(ist any hours for related organizations below line) 2									1		
CRAIG SUNDERLAND			ģ								
CRAIG SUNDERLAND			die				8				
CRAIG SUNDERLAND		related	tee or	ustee			en sat		(W-2/1099-MISC)	,	organization
CRAIG SUNDERLAND		organizations	I frus	nal tr		loyee	E .				and related
CRAIG SUNDERLAND		1	indu:	ututo	ë	dwa.	pest d	a m			organizations
RESIDENT			밀	<u>=</u>	툼	Key	운동	횬			
(2) BOB REESE	(1) CRAIG SUNDERLAND	2.00		}							
VICE PRESIDENT	PRESIDEN'T		X		X				0.	0.	0.
(3) LOUISE URIU	(2) BOB REESE	2.00]								
VICE PRESIDENT	VICE_PRESIDENT		X		X				0.	0.	0.
(4) TRACT MITCHELL 2.00 X X X 0. 0. 0. 0.	(3) LOUISE URIU	2.00									
SECRETATRY	VICE PRESIDENT		X		X				0.	0.	0.
SECRETATRY		2.00									
S			X		Х			ļ	0.	0.	0.
TREASURER		2.00									
Correct District Liason			x		X				0.	0.	0.
DISTRICT LIASON X		2.00									
Correne Bonkowski			X						0.	0.	0.
DIRECTOR		2.00						İ			
S			X					1	0.	0.	٥.
DIRECTOR		2.00									
CLAUDIA MCCLAIN 2.00 X			x						0.	0.	٥.
MMEDIATE PAST PRESIDENT		2.00	Ť	Г				T			
Column			x		$ _{\mathbf{X}}$				0.	0.	0.
DIRECTOR X		2.00									
Column			\mathbf{x}	1	ļ				0.	0.	0.
DIRECTOR X		2.00				<u> </u>					
DIRECTOR			x	İ					0.	0.	0.
DIRECTOR X		2.00						T			
Column		2,00	x						0.	0.	0.
DIRECTOR X		2.00							<u>-</u>		•
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DIRECTOR X 0. 0. 0.		2.00				┢	1				
(15) KATTRINA BRANNON		2.00	x		İ	l	l		0.	0.	0.
DIRECTOR X 0. 0. 0.		2.00		-		H	1-	T	<u> </u>		
(16) JANET GILLINGHAM 2.00 DIRECTOR X 0. 0. 0. (17) JOHN FLOWERS 2.00 X 0. 0. 0. DIRECTOR X 0. 0. 0. 0.		2.00)				1	n.	n.	0.
DIRECTOR X 0. 0. 0. (17) JOHN FLOWERS 2.00 X 0. 0. 0. 0.		2.00	1	 	\vdash		t	t^-	1		<u> </u>
DIRECTOR Z.00 X 0. 0. 0.		2.00	Y			1			n	n.	l
DIRECTOR X 0. 0. 0.		2.00	 ^	t	\vdash	 		\vdash		<u> </u>	·
5 000 00.00		2.00	Y						n	n	n
			11	٠	٠	1		٠.	<u> </u>		

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees			ghe	st C	Compensated Employe	es (continued)			
(A) (B) (C) (D) Name and title Average Position Reportable Rep									(E)		(F)	
Name and title			not c	heck	more	than		Reportable	Reportable		Estimate	
	hours per week		, unle cer an					compensation	compensation from related		amount	
•	(list any	ğ	Г			· ·	Γ	the	organizations		other mpensa	
	hours for	direc				, E	1	organization	(W-2/1099-MISC)	~	from th	
	related	tee or	stee			ansat		(W-2/1099-MISC)	,	0	rganizat	
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				6	and relat	.ed
	below	mgm	ttate	Officer	ешр	hest (Former			0	ganızatı	ons
	line)	E.	E	ਛ	<u>ş</u>	물통	휸			-		
(18) SUE DEDRICK	2.00			ŀ								_
DIRECTOR	2 00	X	ļ		-		-	0.	0	•		0.
(19) LAURA JOHNSON	2.00	.,			1							^
DIRECTOR	2 00	X		-		<u> </u>		0.	0	•		0.
(20) DAN GUNDERSON	2.00	x						0.	o	-		Λ
DIRECTOR	2.00	^	-			-	├─	<u> </u>		- 	 -	0.
(21) JOHN OLSON	2.00	X						0.	o			Λ
DIRECTOR	2.00	^	1			┢	├	<u> </u>		+-		0.
(22) WENDY MCCLURE	2.00	X						0.	o			0.
DIRECTOR	2.00	^		-	ļ	├	├	0.		+		
(23) KRISTY MOTHERSBAUGH	2.00	X	Ì				ļ	0.	O			0.
DIRECTOR	2.00	^	 		┢		1	0.		•	_	
(24) LINDA SHOCKEY DIRECTOR	2.00	X	ļ		ļ	ļ	ļ	0.	o			0.
(25) EILEEN SIMMONS	2.00	-			\vdash	 				•		.
DIRECTOR	2.00	x		•				0.	lo			0.
(26) TED WENTA	2.00		-				\vdash					
DIRECTOR		\mathbf{x}						0.	o			0.
1b Sub-total						▶		0.	0			0.
c Total from continuation sheets to Part V	I, Section A					•		0.	0			0.
d Total (add lines 1b and 1c)	•					>		0.	0	•		0.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bov	e) w	ho r	received more than \$100	0,000 of reportable			
compensation from the organization							_					0
										_	Yes	No
3 Did the organization list any former officer,	director, or tri	uste	e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s	uch individual									3		X
4 For any individual listed on line 1a, is the si	•		-						the organization			
and related organizations greater than \$15										4	·	X
5 Did any person listed on line 1a receive or	-						rela	ted organization or indiv	idual for services	-		
rendered to the organization? If "Yes," com	plete Schedu	le J	for <u>s</u>	uch	per	son			·		<u> </u>	<u> </u>
Section B. Independent Contractors								 	0100.000			
Complete this table for your five highest co										nsatic	n from	
the organization Report compensation for	tne calendar y	/ear	ena	ing v	with	or v	vitni		year		(0)	
(A) Name and business	address	ħΤ	ON:	.				(B) Description of	services	Com	(C) pensation	วก
		TA	OTA.	<u>. </u>							·	
		_										
										_		
2 Total number of independent contractors (_	not I	ımıte	ed to	tho	ose I	iste	d above) who received r	nore than			
\$100,000 of compensation from the organ						0_						
SEE PART VII, SECTIO	N A CON	TI	NU.	AΤ	ΙO	N	SH	EETS		Fo	m 990	(2012)

232008 12-10-12

	PUBLIC S								91-132	J J 3 2 4
	l l	npic	yee	s, aı (C		ugh	est	Compensated Employ (D)	(E)	(F)
(A) Name and title	(B) Average hours per	(cl	neck	Pos	ition		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
•	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensatior from the organization and related organizations
27) TIM REEVES	2.00	X						0.	0.	0
28) KRISTIE DUTTON	37.50							_	_	
XECUTIVE DIRECTOR								0.	0.	0
										
	-			 	_	<u> </u>				
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		$\frac{1}{1}$								
					 					
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	ı	1	1	1	1	1	1	1	I	

Form 990 (2012) EVERETT
Part VIII Statement of Revenue

			Check if Schedule O cont	aıns a response	to any question ir	this Part VIII			
	-					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ts s	1 8	a	Federated campaigns	1a					
our ar	t	b	Membership dues	1b					
A, G		С	Fundraising events	1c	77,961.				
Contributions, Gifts, Grants and Other Similar Amounts	•	d	Related organizations	1d					
iï.	•	е	Government grants (contribut	ions) 1e					
tior S	1	f	All other contributions, gifts, gran	ts, and					
호			similar amounts not included abor	ve [1f]	197,656.				
벌	9	9	Noncash contributions included in lines	1a-1f \$					
<u>8</u> 8		<u>h</u>	Total. Add lines 1a-1f		•	275,617.			
j					Business Code				
e l	2 8	а	DISTRICT CONTRACT		900099	32,000.	32,000,		
le G	ı	b	FUND MANAGEMENT FEE		900099	4,360.	4,360,		
n S	(С		 					
Par Per	(d							<u> </u>
Program Service Revenue		е							
-			All other program service reve	enue					
\rightarrow		9_	Total. Add lines 2a-2f		<u> </u>	36,360.	,		+
	3		Investment income (including	dividends, intere	est, and				
			other similar amounts)			27,364.			27,364.
- 1	4		Income from investment of ta	x-exempt bond p	proceeds				
	5		Royalties	() D1	(v) Damanal				
			0	(ı) Real	(ii) Personal				
	6		Gross rents						
			Less rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)	(1) Securities	(II) Other				
	/	а	Gross amount from sales of	(i) Securities	(ii) Other				
		_	assets other than inventory	1,785,121	' 				
		D	Less cost or other basis and sales expenses	1,706,563					
		_	Gain or (loss)	78,558					
			Net gain or (loss)	18,336	•	78,558.			78,558,
_			Gross income from fundraisin	a events (not		70,350.			70,330,
nue	Ū	_	including \$	-					
Other Rever			contributions reported on line						
Ŗ			Part IV, line 18	a	52,300.				
the		b	Less direct expenses	b	1				
0			Net income or (loss) from fund			31,776.			31,776,
			Gross income from gaming a	=				·	<u> </u>
			Part IV, line 19	а	.				
		b	Less direct expenses	ь					
			Net income or (loss) from gan	ning activities	•				
	10	а	Gross sales of inventory, less	returns					
			and allowances	а					
		b	Less cost of goods sold	b					
		С	Net income or (loss) from sale	es of inventory					
			Miscellaneous Revent	ne	Business Code				
	11	а							
		b							
		С							
		d	All other revenue						
		е	Total. Add lines 11a-11d		>				
	12		Total revenue. See instructions.			449,675,	36,360.	<u> </u>	137 698.
23200	12								Form 990 (2012)

Form 990 (2012) EVERETT PUBLI
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must comp		_	mplete column (A)	
	Check if Schedule O contains a respons	se to any question in thi		(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	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	187,057.	187,057.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	68,022.	68,022.		
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	57,363.	17,209.	11,473.	28,681.
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	35,819.	12,809.	12,809.	10,201.
8	Pension plan accruals and contributions (include		,		,
·	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	2,209.	707.	574.	928.
_	Payroll taxes	7,834.	2,507.	2,037.	3,290.
10	Fees for services (non-employees)	7,034.	2,301.	2,037.	3,250.
11	·				
_	T T				
b	Legal	1,750.		1,750.	
С	Accounting	1,730.		1,750.	
d	, , <u>, , , , , , , , , , , , , , , , , </u>				
е	Professional fundraising services. See Part IV, line 17				,
f	Investment management fees				
g					
	column (A) amount, list line 11g expenses on Sch O.)	1 017		1 017	
12	Advertising and promotion	1,217.	602	1,217.	******
13	Office expenses	2,405.	602.	1,803.	
14	Information technology	1,328.		1,328.	
15	Royalties				
16	Occupancy			004	
17	Travel	834.		834.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,125.	3,125.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	971.		485.	486.
23	Insurance	1,169.		1,169.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) HIGH SCHOOL & BEYOND	11,506.	11,506.		
	MT COUT T ANDOUG	10,723.	7,974.	2,749.	
b	COMMITTELY OFFICER OFF	3,667.	2,750.	2,12,0	917.
ب د	ANDRIAL CAMPATON C DD	1,913.	2,750.		1,913.
d		1,367.	269.	1,098.	<u> </u>
	All other expenses Add lines 1 through 24e	400,279.	314,537.	39,326.	46,416.
25	Total functional expenses. Add lines 1 through 24e	±00,413.	<u> </u>	39,320.	40,410
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)	·	l	L	Form 990 (2012)

EVERETT PUBLIC SCHOOLS FOUNDATION Form 990 (2012) Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X Beginning of year End of year 67,534. 50,010. 1 Cash - non-interest-bearing 81,294. 114,615. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 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 instr) Complete Part II of Sch L 6 7 Notes and loans receivable, net Inventories for sale or use 8 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 8,743. 10a basis Complete Part VI of Schedule D 971. 7,772. 0 Less accumulated depreciation 10b 10c 1,205,976. 1,198,848. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 13 Investments - program related. See Part IV, line 11 13 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 1,354,804. 1,371,245. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,649. 17 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Liabilities Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 0 2,484. 25 Schedule D 4,363. 1,649 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 145,059 141,087. 27 Unrestricted net assets 27 151,731. 124,631. 28 28 Temporarily restricted net assets 1,056,365. 1,101,164. 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31

> 371,245. Form **990** (2012)

1,366,882.

32

33

34

32

33

34

1,353,155

1,354,804.

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3b

Form 990 (2012)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012
Open to Public

Inspection

Name of the organization

Employer identification number

Part I	Reason		ity Status (All organization) See inst	ructions	<u> </u>	T-132	934	4
			because it is (For lines 1					20110110.				
1	1		s, or association of churc	_		-						
2	1		0(b)(1)(A)(ii). (Attach Scl			J. 1. J.	-,(-,(-,(-,					
3	1		tal service organization of		n section	170(b)(1)(A)(rii).					
4	1	-	operated in conjunction					b)(1)(A)(iii	i). Enter t	he hospi	tal's na	me,
	city, and state		,					-10-10-10-10-1	•	•		,
5	1		benefit of a college or un	niversity ov	vned or op	erated by	a governr	nental unit	describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)									
6	A federal, sta	te, or local governm	ent or governmental unit	described	in section	n 170(b)(1)(A)(v).					
7 X	An organizati	on that normally rec	eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r from the	general	public de	scribed	l ın
	section 170(b)(1)(A)(vi). (Comple	te Part II)									
8 🗆	A community	trust described in s	ection 170(b)(1)(A)(vi). (Complete	Part II)							
9 🗀	An organizati	on that normally rec	eives (1) more than 33 1	/3% of its	support fr	om contril	butions, m	embershij	o fees, a	nd gross	receipt	s from
	activities rela	ted to its exempt fur	nctions - subject to certa	ın exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support	from gro	ss inve	stment
	income and u	unrelated business to	axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization	after Jun	e 30, 19	975
	See section	509(a)(2). (Complete	Part III)									
10 🖳	An organizati	on organized and or	perated exclusively to tes	st for publi	c safety S	ee sectio	n 509(a)(4	·).				
11 🖳	An organizati	on organized and or	perated exclusively for th	e benefit d	of, to perfo	rm the fur	nctions of,	or to carry	out the	purpose	s of one	or or
	more publicly	supported organiza	ations described in section	on 509(a)(1	l) or sectio	n 509(a)(2). See sec	tion 509(a	a)(3). Ch	eck the b	ox that	
		· · · · · · · · · · · · · · · · · · ·	organization and comple		•							
	a Ll Type I		•	/pe III - Fui	•	•		• •		n-function	-	_
e L			it the organization is not		•	•	•		•	•		
		-	han one or more publicly		-				9(a)(1) or	section 5	09(a)(2)
f	-		ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		rganization, check th				_			_			ш
9	•		organization accepted ar			•						
	••	•	lirectly controls, either al	one or tog	ether with	persons d	lescribed i	n (II) and (I	III) below		Yes	s No
	_	• •	upported organization?							11g	1	+-
		•	n described in (i) above?		•					11g(+
	• •	•	person described in (i) o							11g(<u>(II) </u>	
h	Provide the f	ollowing information	about the supported org	ganization	(S).							
(1) No.		/··› FIN	(III) T	(iv) Is the c	rganization	(v) Did voi	i notify the	(vi) Is	the	(-11) A		
• •	e of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	r ,	sted in your	, ,	ion in col.	lorganizatio	on in col.	(vii) Amo	unt of m support	onetary
OI.	ganization		above or IRC section	governing	document?	(i) of you		(i) organız U.S	.?		upport	
			(see instructions))	Yes	No	Yes	No	Yes	No			
				 								
					İ							
].					
_												
_		_						<u> </u>				
Total												

232021 12-04-12

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2012

91-1329342 Page 2

Schedule A (Form 990 or 990-EZ) 2012 EVERETT PUBLIC SCHOOLS FOUNDATION 91-1329:

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

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

Sec	tion A. Public Support					-				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants.")	168,227.	173,822.	189,433.	245,806.	275,617.	1,052,905,			
2	Tax revenues levied for the organ-									
	ızatıon's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	168,227.	173,822.	189,433.	245,806.	275,617.	1,052,905.			
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)						99,826.			
	Public support. Subtract line 5 from line 4					<u>.</u>	953,079.			
Sec	ction B. Total Support	·		, 	1	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
7	Amounts from line 4	168,227.	173,822.	189,433.	245,806.	275,617.	1,052,905.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties						4.5 505			
	and income from similar sources	33,131.	27,906.	30,631.	28,575.	27,364.	147,607.			
9	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)	ļ								
	Total support. Add lines 7 through 10	<u> </u>		,	l <u> </u>		1,200,512,			
	Gross receipts from related activities					12	194,189.			
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thii	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	. \Box			
<u></u>	organization, check this box and sto	p here	roontogo			· · · · · · · · · · · · · · · · · · ·				
	ction C. Computation of Publ					T T	70 20 %			
	Public support percentage for 2012 (•		column (f))		14	79.39 %			
	Public support percentage from 201				44 - 00 4 (00)	15	83.17 %			
16a	33 1/3% support test - 2012. If the				14 is 33 1/3% or r	nore, check this b				
	stop here. The organization qualifies		-		45 00 4 /00		► X			
t	33 1/3% support test - 2011. If the				ine 15 is 33 1/3%	6 or more, check t	nis box			
	and stop here. The organization qua	•								
17a	a 10% -facts-and-circumstances tes									
	and if the organization meets the "fac					rt IV how the orga	nization			
	meets the "facts-and-circumstances"	•	•		_		▶∟			
ŧ	10% -facts-and-circumstances tes									
	more, and if the organization meets t						e			
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16	5a, 16b, 17a, or 17						
					Sch	edule A (Form 990	0 or 990-E Z) 2012			

Schedule A (Form 990 or 990-EZ) 2012 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to
walify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	siow, piease comp	Diete Fart II.				
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(2) = = = =	127	G	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	membership fees received (Do not	1					
	include any "unusual grants ")	I					
	Gross receipts from admissions,						
_	merchandise sold or services per-	I		!			
	formed, or facilities furnished in	l					
	any activity that is related to the		İ				
_	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
7 4	3 received from disqualified persons		1				
h	Amounts included on lines 2 and 3 received				 	 	
IJ	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						
	Public support (Subtract line 7c from line 6)		L	<u> </u>			<u> </u>
Sec	ction B. Total Support		· · · · · · · · · · · · · · · · · · ·	- ₁		·-	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6				<u> </u>		
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
h	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	•						
	acquired after June 30, 1975			 			
_	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				ļ		
12	Other income Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV)			1			ļ
13	Total support (Add lines 9, 10c, 11, and 12)						<u> </u>
	First five years. If the Form 990 is fo		's first, second, th	ird, fourth, or fifth	tax year as a sect	on 501(c)(3) organı	zation,
. •	check this box and stop here	9	•	•	•		▶□
Se	ction C. Computation of Publ	lic Support Pe	ercentage				
	Public support percentage for 2012 (column (f))		15	9/
16				.,,		16	%
_	ction D. Computation of Inve				······································		
_						17	9
	Investment income percentage for 20			10, coluitiii (i <i>j)</i>		18	9
18	•				1E		
198	a 33 1/3% support tests - 2012. If the						17 IS NOT
	more than 33 1/3%, check this box a						. ▶∟_
t	33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, ch						ւ ▶⊑
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	<u>9a, or 19b, check</u>	this box and see i	nstructions	
2320	23 12-04-12				Sc	chedule A (Form 9	30 or 990-EZ) 201

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ 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. 2012
Open to Public Inspection

Name of the organization

EVERETT PUBLIC SCHOOLS FOUNDATION

Employer identification number

91-1329342

D	. EVERETT PUBLIC SCHO	JOLS FOUNDATION	91-1329342
Par			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
	<u>_</u>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		11.00
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	rriting that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad		sed only
_	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?	, , ,	Yes No_
Par		anization answered "Yes" to Form 990. Pa	
1	Purpose(s) of conservation easements held by the organization		
'	Preservation of land for public use (e.g., recreation or ed		orically important land area
	Protection of natural habitat	Preservation of a certif	• •
		Preservation of a certif	led Historic structure
_	Preservation of open space	- d	f
2	Complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the complete 2a through 2d if the complete 2a through 2d if the complete 2a through 2d if the complete 2a through 2d if the complete 2a through 2d if the complete 2a through 2d if the complete 2a through 2d if the complete 2a through 2d if the complete 2a th	ed conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		Hald and a find of the Tau Vana
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	* *	2c
d	Number of conservation easements included in (c) acquired a	ifter 8/17/06, and not on a historic structu	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	ement is located >	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements du	iring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing conservation easements during	the year 🕨 \$
8	Does each conservation easement reported on line 2(d) above		
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, and balance sheet, and
•	include, if applicable, the text of the footnote to the organizat		
	conservation easements		
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
10	If the organization elected, as permitted under SFAS 116 (AS		ent and balance sheet works of art.
Ia	historical treasures, or other similar assets held for public exh		
			too or public dorvido, provido, in rain viii,
	the text of the footnote to its financial statements that described and account of the footnote to its financial statements.		and halance cheet works of art, historical
D	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, of research in furtherance of pur	one 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		> \$
2	If the organization received or held works of art, historical trea		gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		> \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2012

12-10-12

		PUBLIC SCH				1329342 Page 2
Part	III Organizations Maintaining Co	ollections of Ar	t, Historical Tre	easures, or Oth	er Similar A	ssets(continued)
3	Using the organization's acquisition, accession	n, and other records	s, check any of the f	following that are a	significant use o	f its collection items
	(check all that apply)					
а	Public exhibition	d	Loan or exch	nange programs		
b	Scholarly research	е	Other			
С	Preservation for future generations					
4	Provide a description of the organization's co	llections and explain	how they further th	ie organization's ex	empt purpose in	Part XIII.
5	During the year, did the organization solicit or	receive donations of	of art, historical treas	sures, or other simila	ar assets	
	to be sold to raise funds rather than to be ma	intained as part of th	ne organization's co	llection?		Yes No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if the organization	n answered "Yes" to	o Form 990, Parl	: IV, line 9, or
	reported an amount on Form 990, Part	t X, line 21				
1a	Is the organization an agent, trustee, custodia	an or other intermed	ary for contribution	s or other assets no	nt included	
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table			
						Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?			Yes No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	planation has been	provided in Part XII	<u> </u>	
Par	t V Endowment Funds. Complete if	the organization an	swered "Yes" to For	rm 990, Part IV, line	10.	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	back (e) Four years back
1a	Beginning of year balance	1,056,365.	1,007,052,	958,339	921,9	1,003,897,
b	Contributions	3,261.	29,760,	6.725	, 11,4	7,544,
С	Net investment earnings, gains, and losses	81,088,	49,694.	79,630	49.	202. <56,976.
d	Grants or scholarships	39,550,	30,141,	37,642	. 24.:	175. 32,554,
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance	1,101,164,	1,056,365,	1,007,052	958	921,911,
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g, column (a	i)) held as		
а	Board designated or quasi-endowment	28.00	_%			
b	Permanent endowment ► 72.00	%				
С	Temporarily restricted endowment ▶	%				
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.				
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered for	the organization	١
	by					Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations					3a(ii) X
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R?			3b
4	Describe in Part XIII the intended uses of the					
Par	t VI Land, Buildings, and Equipm	ent. See Form 990), Part X, line 10			· · · · · · · · · · · · · · · · · · ·
	Description of property	(a) Cost or o	1 ' '		Accumulated	(d) Book value
		basis (investr	nent) basis	(other) c	lepreciation	
1a	Land					
b	Buildings					
С	Leasehold improvements					
d	Equipment					
e	Other	<u> </u>		8,743.	971	7,772.
Total	, Add lines 1a through 1e (Column (d) must e	qual Form 990. Part	X, column (B), line	10(c).)		7,772.

Schedule D (Form 990) 2012

	C SCHOOLS FOUNDATION	91-1329342 Page 4
Part XI Reconciliation of Revenue per Audite	d Financial Statements With Revenue	per Return
1 Total revenue, gains, and other support per audited finan	ncial statements	1
2 Amounts included on line 1 but not on Form 990, Part VII	II, line 12.	
a Net unrealized gains on investments		
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d		
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not	t on line 1	
a Investment expenses not included on Form 990, Part VIII	i, line 7b 4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b		4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form	990, Part I, line 12)	5
Part XII Reconciliation of Expenses per Auditor	ed Financial Statements With Expens	es per Return
1 Total expenses and losses per audited financial statement	nts	1
2 Amounts included on line 1 but not on Form 990, Part IX	, line 25	
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not	on line 1	
a Investment expenses not included on Form 990, Part VII	I, line 7b 4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b	-	4c
5 Total expenses. Add lines 3 and 4c. (This must equal For	m 990, Part I, line 18)	5
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b PART V, LINE 4: SCHOOL PROGRAMS	Also complete this part to provide any additional , CLASSROOM GRANTS , TUITI	
SCHOLARSHIPS, VARIOUS AWARDS &	SPECIFIC PROGRAMS.	
	······································	
		Schedule D (Form 990) 2012

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

ties 207

Open To Public

OMB No 1545-0047

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

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

Inspection

ame of the organization	TRITC SCHOOLS FO	רוואדו	ътт	ON		ntification number
Part Fundraising Activities. Cor						
1 Indicate whether the organization raised f a	e Solicitat f Solicitat g Special al agreement with any individual fil) or entity in connection with pi als or entities (fundraisers) pursi	ion of ion of fundra (includ	non-go govern ising of ling of onal f	overnment grants nment grants events fficers, directors, trus undraising services?	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribi	Did aiser istody trol of itions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		 				
	** *****					
						1
					!	
Total 3 List all states in which the organization is or licensing.	registered or licensed to solicit	contrib	ution	s or has been notifie	d it is exempt from r	egistration
	Internet and email solicitations Phone solicitations g Solicitation of government grants Phone solicitations e organization have a written or oral agreement with any individual (including officers, directors, trustees or imployees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No s, "list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be ensated at least \$5,000 by the organization and address of individual or entitity (fundraiser) and address of individual or entitity (fundraiser) and address of individual or entitity (fundraiser) and address of individual or entitity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entity (fundraiser) and address of individual or entities (fundraiser) and address of individual or entities (fundraisers) and address of individual or entities (fundraisers) and address of individual or entities (fundraisers) and address of individual or entities (fundraisers) (iii) Activity (iii) Did (iii) (iv) Gross receipts (iv) (or retained by) (or retained					
			-		· · · · · · · · · · · · · · · · · · ·	
		_			<u></u>	
LUA Describer Ant Notice and	the Instructions for Form 000				Cohodula O /F	m 000 or 000-E71 2012

use												
Expe	3	Noncash prizes		<u></u>	-							
Direct Expense	4	Rent/facility costs	_									
	5	Other direct expenses		±= -								
	6	Volunteer labor		Yes% No		Yes No	_ %		Yes No	%		
	7	Direct expense summary Add lines 2 through	n 5 in	n column (d)						•		
	8	Net gaming income summary Combine line 1	i, colı	lumn d, and line 7						<u> </u>		
9	Ent	ter the state(s) in which the organization opera	ıtes g	gaming activities								
		he organization licensed to operate gaming ac	:tivitie	es in each of these	stat	es?					Yes	☐ No
b	If "	No," explain										
		ere any of the organization's gaming licenses re Yes," explain		-		_		-	• 		Yes	No
	_											
2320	32 0	1-07-13							Schedule	G (Fo	rm 990 or 990-	EZ) 2012

Sche	hedule G (Form 990 or 990-EZ) 2012 EVERETT PUBLIC SCHOOLS FOUNDATION 91-13	<u> 29342</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	☐ No
12	ls the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity operated in.		
а	a The organization's facility	13a	%
b	b An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.		
	Name		
	Address >	<u></u>	
15a	ia Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
h	b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount		
Ü	of gaming revenue retained by the third party \$		
_	c If "Yes," enter name and address of the third party		
C	c in res, enter name and address of the third party		
	Name ▶		
	Address ►		
40			
10	Gaming manager information		
	Name ▶		
	Gaming manager compensation \$		
	Calling Manager compensation P		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	7 Mandatory distributions		
а	a is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	∟ No
b	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
Da	organization's own exempt activities during the tax year \$\begin{array}{l} \subseteq Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) are	nd (v) and	I Port III
Га	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (iii) at		
	illies 3, 30, 100, 130, 130, 130, 10, and 170, as applicable Also complete this part to provide any additional shift interior to	Jee manu	
			
2320	2083 01-07-13 Schedule G (Form 9	 390 or 990	D-EZ) 2012

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service
Name of the organizati

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

OMB No 1545-0047 2012

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

Open to Public Inspection

ime of the organization	Employer identification fiduliber
EVERETT PUBLIC SCHOOLS FOUNDATION	91-1329342
rmation on Grants and Assistance	
non maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	; 4
	A Yes
יי בוסו	EVERETITY FUBLIC SCHOOLS FUNDALION and Assistance General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grants of the grants or assistance, and the selection criteria used to award the grants or assistance?

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000 Part II can	be duplicated if additi	onal space is need	pa			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EVERETT SCHOOL DISTRICT #2							
3715 OAKES AVENUE EVERETT WA 98201	91-6001542		32,296,	0			SUMMER SCHOOL TUITION,
EVERETT SCHOOL DISTRICT #2							
3715 OAKES AVENUE			,	•			
EVERETT, WA 98201	91-6001542		32,201.	0			CLASSROOM GRANTS.
EVERETT SCHOOL DISTRICT #2							
3715 OAKES AVENUE							ALL DAY KINDERGARTEN
EVERETT WA 98201	91-6001542		42,926.	0.			PROGRAM,
EVERETT SCHOOL DISTRICT #2							
3715 OAKES AVENUE							COLLEGE IN THE HIGH
EVERETT WA 98201	91-6001542		9,631.	0			SCHOOL PROGRAM
EVERETT SCHOOL DISTRICT #2							
3715 OAKES AVENUE							
EVERETT WA 98201	91-6001542		31,000.	0			STEM PROGRAM
EVERETT SCHOOL DISTRICT #2							
3715 OAKES AVENUE							
EVERETT WA 98201	91-6001542		25,000.	0.			JOHN D WARNER AWARD

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

3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2012)

91-1329342 Page 1	
FOUNDATION	s and Organizations in the United States (Schedule I (Form 990), Part
EVERETT PUBLIC SCHOOLS FOUN	nd Other Assistance to Government
n 990) EVERETT	n of Grants ar

Schedule (Form 990) EVERETT PUBLIC SCHOOLS FOUNDATION Page 1	(b) EIN (c) IRC section (d) Amount of rapplicable cash grant assistance appraisal, other)	91-6001542 7,382, 0, DISTRICT GRANTS				
JBLIC SCHOO	(a)	91-6001542				
Schedule I (Form 990) EVERETT PI	(a) Name and address of organization or government	EVERETT SCHOOL DISTRICT #2 3715 OAKES AVENUE EVERETT WA 98201				

EVERETT PUBLIC SCHOOLS FOUNDATION

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Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Schedule I (Form 990) (2012) Part III

				i	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
					•
		•	c		
NEW TEACHER GRANTS	4	4,000			
MOTUTUO DECONTACTO DECONTRACTOR	33	2,006.	0		
DISIRICI IBACABA NECOGNIIION					
	- 0	310 63	c		
SCHOLARSHIPS	9	010,20			
Omplete this part to provide the	de the information	required in Part I.	line 2. Part III, colum	information required in Part I, line 2, Part III, column (b), and any other additional information	ormation
Part IV Supplemental III of III and III of I					

SCHEDULE I, PART I, LINE 2: TEACHERS SUBMIT GRANTS TO FOUNDATION,

5 COMMITTEE OF 8 BOARD MEMBERS REVIEWS THE GRANTS AND RATES THEM ACCORDING

AN SEVERAL VARIABLES, SCORING IS TALLIED AND THE TOP GRANTS ARE ISSUED. AMOUNT IS ESTABLISHED BEFORE HAND, ONCE THAT TOTAL HAS BEEN REACHED GRANTS

BELOW THAT THRESHOLD ARE NOT FUNDED

SCHEDULE 0

(Form 990 or 990-EZ)
Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

EVERETT PUBLIC SCHOOLS FOUNDATION

Employer identification number 91-1329342

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
INVOLVEMENT AND PRIVATE DONATIONS-BOTH CORPORATE AND INDIVIDUAL.
FORM 990, PART VI, SECTION B, LINE 11: A COPY OF FORM 990 IS DISTRIBUTED
TO BOARD MEMBERS BEFORE FILING. BOARD MEMBERS MAY SUGGEST CHANGES IF DEEMED NECESSARY.
FORM 990, PART VI, SECTION B, LINE 12C: NO BOARD MEMBER IS ALLOWED TO
SERVE ON ANOTHER ORGANIZATION'S BOARD IF IT IS DEEMED TO BE IN CONFLICT.
FORM 990, PART VI, SECTION B, LINE 15: ANNUAL REVIEW DONE.
COMPENSATION DETERMINED BASED ON COMPARABILITY DATA. EXECUTIVE DIRECTOR PRESENTS TO BOARD EXECUTIVE TEAM. EXECUTIVE TEAM APPROVES.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE
AVAILABLE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
ROUNDING 1.

Internal Revenue Service Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property) See separate instructions. ➤ Attach to your tax return.

Business or activity to which this form relates

990

OMB No 1545-0172

Identifying number

EVERETT PUBLIC SCHOOLS FOUNDATION FORM 990 PAGE 10 91-1329342 Part I | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 the tax year 15 Property subject to section 168(f)(1) election 15 971 16 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions) Part III Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2012 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (b) Month and year placed (c) Basis for depreciation (business/investment use only - see instructions) (e) Convention (f) Method (a) Depreciation deduction (a) Classification of property In service 19a 3-year property 5-year property b 7-year property C 10-year property d 15-year property е 20-year property S/L 25 yrs. 25-year property 9 MM S/L 27 5 yrs Residential rental property h ММ S/L 27 5 yrs S/L MM 39 vrs Nonresidential real property i S/L ММ Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. S/L 12-year b S/L 40 yrs MM 40-year Part IV | Summary (See instructions) 21 21 Listed property Enter amount from line 28 22 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 971. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 22

23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

44

Form 4562 (2012)

218252 12-28-12

44 Total. Add amounts in column (f) See the instructions for where to report