

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



### Form **990**

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

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

2012
Open to Public Inspection

ΔΕ	or the	2012 calendar year, or tax year beginning OCT 1, 2012 and ending	SEP 30, 2013	
B c	Check if ipplicable	C Name of organization	D Employer identifi	cation number
_	∵ ∏Addres			
	change	Washington Restaurant Association		
	□Name □change	Doing Business As	91-0	586362
	Initial	Number and street (or P O box if mail is not delivered to street address)  Room/s	uite E Telephone numbe	r
F	Termin	The second of th		956-7279
-	√ated □Amend			2,418,948.
	return □Applica	City, town, or post office, state, and ZIP code	G Gross receipts \$	
	tion pendin	Olympia, WA 90301-1307	H(a) Is this a group re	
	penam	F Name and address of principal officer: Anthony Anton	for affiliates?	Yes X No
		same as C above	H(b) Are all affiliates inc	cluded? Yes No
1 1	Гах-өхө	mpt status:	527 If "No," attach a	list. (see instructions)
_		e: ▶ www.warestaurant.org	H(c) Group exemptio	
				A State of legal domicile WA
			ear of formation 1727	A State of legal dofinctie WA
		Summary	- the	
ě		Briefly describe the organization's mission or most significant activities. Promotin	<u>g the restaur</u>	ant
ě		industry and helping our members succeed.		
Ĕ	2 (	Check this box $lacktriangle$ if the organization discontinued its operations or disposed of ${f r}$	nore than 25% of its net as	ssets
Š	3 1	Number of voting members of the governing body (Part VI, line 1a)	3	24
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)	4	24
<b>α</b> 5			5	30
Ę.		Fotal number of individuals employed in calendar year 2012 (Part V, line 2a)	<del></del>	300
Activities & Governance		Total number of volunteers (estimate if necessary)	6	000 515
Ac	7 a ~	Total unrelated business revenue from Part VIII, column (C), line 12	7a	293,515.
	b l	Net unrelated business taxable income from Form 990-T, line 34	7b	206,215.
			Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)	0.	0.
Revenue	9 1	Program service revenue (Part VIII, line 2g)	2,685,590.	1,945,819.
èVe		nvestment income (Part VIII, column. (A), lines 3, 4, and 7d)	126,286.	207,260.
ď	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	316,341.	210,463.
			3,128,217.	2,363,542.
		Total revenue - add lines 8 through 11 (must equal Ran VIII column (A), line 12)		
		Grants and similar amounts paid (Pa <u>rt IX, column (A), lines 1:3)</u>	0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15 3	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,978,801.	1,382,598.
Š	16a i	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Expenses	Ь.	Fotal fundraising expenses (Part IX, column (D), line 25)		
ŵ	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,102,368.	826,771.
	l	Fotal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,081,169.	2,209,369.
		Revenue less expenses Subtract line 18 from line 12	47,048.	154,173.
- S	19 1	nevenue less expenses. Subtract line 16 from line 12		
Net Assets or Fund Balances			Beginning of Current Year	End of Year
Sse	20	Total assets (Part X, line 16)	2,070,060.	2,113,059.
절	21	Total liabilities (Part X, line 26)	862,550.	723,692.
		Net assets or fund balances Subtract line 21 from line 20	1,207,510.	1,389,367.
Pε	art II	Signature Block		
Und	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	y knowledge and belief, it is
		, and complete. Declaration of preparer (other than officer) is based on all information of which prep		-
			4-28-14	
Sigi	,	Signature of officer	Date	
Her	- 1	Anthony Anton, President & CEO		
nei	•	Type or print name and title		
			Date Check	PTIN
		Print/Type preparer's name reparer's signature		—
Paid -	r	David A. Coates, CPA	03/27/14 self-employ	
	arer	Firm's name Frost & Company, P.S.	Firm's EIN ▶	91-1136436
Use	Only	Firm's address P O Box 7609		
		Olympia, WA 98507-7609	Phone no (	360) 786-8080
May	the IR	S discuss this return with the preparer shown above? (see instructions)		Yes No
	01 12-10			Form <b>990</b> (2012)

-orm	990 (2012) Washington Restaurant Association	91-0586362 Page 2
Par	rt III Statement of Program Service Accomplishments	
1 (4)	<del></del>	[]
_	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission	mbers succeed
	Promotion of the restaurant industry and helping our men	ibers succeed.
2	Did the organization undertake any significant program services during the year which were not listed on	<u></u>
	the prior Form 990 or 990-EZ?	☐ Yes X No
	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?	Yes X No
•	•	
	If "Yes," describe these changes on Schedule O	manufact by expenses
4	Describe the organization's program service accomplishments for each of its three largest program services, as	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, and
	revenue, if any, for each program service reported.	<del></del>
4a	(Code) (Expenses \$	
	Established a consulting network of experts to give members	bers free 30
	minute advice sessions on any business need of a restaux	rant.
		-
		• •
4b	/6	<del></del>
		•
70	(Code) (Expenses \$ including grants of \$) (Reveni	
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Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A  Is the organization required to complete Schedule B, Schedule of Contributors?  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  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  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  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  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  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
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			X
Schedule D, Part III 8			X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	1		
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			X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	1		
endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		1	Х
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VIII, VIII, IX, or X	1		
as applicable			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,		1	
Part VI	.	$\mathbf{x}$	
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	,	ľ	Х
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	,		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 <sup>9</sup> If "Yes," complete Schedule D, Part IX	,		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	_	X	
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	.	хΙ	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	T		
Schedule D, Parts XI and XII	.	-	Х
b Was the organization included in consolidated, independent audited financial statements for the tax year?	1		
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	,	x	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	+		X
14a Did the organization maintain an office, employees, or agents outside of the United States?			Х
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1	$\neg$	
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	,		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	1		
or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	1		Х
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	1		
located outside the United States? If "Yes," complete Schedule F, Parts III and IV			X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	Τ		
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I			Х
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	T	İ	
1c and 8a? If "Yes," complete Schedule G, Part II			X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	$\top$		
complete Schedule G, Part III			X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	$\top$	$\neg$	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	_	$\dashv$	
		90 (2	2012)

L:	Official of Hodging Control (Community)	_	f	1
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			v
	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,			x
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	-	<u> </u>
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	-00	X	
	Schedule J	23		
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	240		х
	Schedule K If "No", go to line 25	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
		240		-
234	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		
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	238		
ь	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			ŀ
	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			
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	7:		
	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		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	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			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
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	X	ļ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
þ	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	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	ļ	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		[	
_	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		,,	
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>

Form 990 (2012) Washington Restaurant Association 91-0586362 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 19 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 30 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **b** If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O X 3ь 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)? X 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 c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х ва **b** If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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?

Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?

**b** Did the organization make a distribution to a donor, donor advisor, or related person?

10 Section 501(c)(7) organizations. Enter.

a Initiation fees and capital contributions included on Part VIII, line 12

b 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.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Section 501(c)(29) qualified nonprofit health insurance issuers.

a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Scheol

	125		
	13b		1
	13c		. ]
		14a	X
dule O		14b	

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8

9a

9ь

12a

13a

10a

10b

11a

11b

12b

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			X						
<u>Sec</u>	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 24									
	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 24									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	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?									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		_X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6	Did the organization have members or stockholders?	6_	X							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a	X							
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8ь	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	_						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X						
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	ĺ								
	ın Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
	The organization's CEO, Executive Director, or top management official	15a	X							
b	Other officers or key employees of the organization	15b	<u>X</u>							
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		<u> X</u>						
Þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		- 1							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		- 1							
0	exempt status with respect to such arrangements?	16b								
	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 (Section 501(c)(3)s only) a	vailabl	е							
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	finan	cıal							
00	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 records of the organizat	iou. 🕨								
	Teran Petrina - 360-956-7279  510 Plum Stroot SE Suito 200 Olympia III 00501									
232008	510 Plum Street SE, Suite 200, Olympia, WA 98501									

### 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

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)	(B)				) )	iipoi	1000	(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one box, unless person is both an		Reportable	Reportable	Estimated				
	hours per week	box	unle cer an	ss pe id a d	rson irecto	is bot or/trus	han tee)	compensation from	compensation from related	amount of other
	(list any	ģ						the	organizations	compensation
	hours for	or director				D E		organization	(W-2/1099-MISC)	from the
	related	State	anster		83	beusa		(W-2/1099-MISC)		organization
	organizations below	lan tr	ona		akojdi	E 55				and related
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Bret Stewart	1.40									
Immediate Past Chair		X		X				0.	_ 0.	0.
(2) Jim Rowe	1.40	]								
Chairman of Board		X		Х				0.	0.	0.
(3) Mark Chriest	1.40									
Secretary/Treasurer		X		X				0.	0.	0.
(4) Phil Costello	1.40									l:
Vice Chair		X						0.	0.	0.
(5) Gary Sutter	1.40									
EF President		X						0.	0.	0.
(6) Karissa Bresheare	0.50									
Board member		Х						0.	0.	0.
(7) Reggie Frederick	0.50									
Board member	<u> </u>	Х						0.	0.	0.
(8) Scott Dickinson	0.50									
Board member		X						0.	0.	0.
(9) Bob Materne	0.50									
Board member		X						0.	0.	0.
(10) Jeff Iverson	0.50									
Board member		Х						0.	0.	0.
(11) Mike George	0.50									
Board member		X						0.	0.	0.
(12) Pete Hanning	0.50									
Board member		X						0.	0.	0.
(13) Lane Hoss	0.50									
Board member		Х						0.	0.	0.
(14) Amy Igloi	0.50									
Board member		X						0.	0.	0.
(15) Matt McCarthy	0.50						Ì			
Board member		Х						0.	0.	0.
(16) Dwayne Northrop	0.50									
Board member	<del> </del>	X				l		0.	0.	0.
(17) Travis Rosenthal	0.50							_		
Board member	<u> </u>	X						0.	0.	0.

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Page
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)							(D)	(E)		(F)	
Name and title	Average Position (do not check more than one							Reportable	Reportable	•	Estimat	ed
	hours per	box, unless person is both an officer and a director/trustee)						compensation	compensation		amount	of
	week	_	cer an	dad	recto	r/trus	tee)	from from related		-	other	
	(list any							the	organizations	C	ompens	
	hours for	5	88			ate		organization	(W-2/1099-MISC)		from th	
	related organizations	Set	ag .		g.	pens		(W·2/1099·MISC)		organizati		
	below	rat tr	ora		e e	25 8	١.			1	and rela	
	line)	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	E E			"	rganızat	10113
(18) Craig Schafer	0.50	† <del>-</del>	-		<u> </u>		_			1		
Board member		X						0.	0 .			0.
(19) James Yost	0.50				İ		Ì					
Board member		X			<u> </u>	_	<u> </u>	0.	0 .	· <u>                                     </u>		0.
(20) Erin Everheart	0.50	٠,							•			^
Board member	0.50	X				_		0.	0 .	<u>-</u>		0.
(21) Nick Musser	0.50	X						0.	0.			0.
Board member (22) Sharon Boldizsar	0.50	^			$\vdash$			0.	0.	+		
Board member	0.30	X						0.	0.			0.
(23) Brian Moreno	0.50		-	_	-	-						
Board member		X						0.	0.	.		0.
(24) Chad Mackay	0.50											
Board member		Х						0.	0.			0.
(25) Anthony Anton	40.00							154 045	10 262			•
President & CEO	40.00	_		X	_			174,045.	18,360	•		0.
(26) Teran Petrina	40.00	1		х				57,341.	5/ 9//			0.
Vice President & COO  1b Sub-total	<u> </u>	L	L	Λ	<u> </u>	_	L	231,386.	54,944. 73,304.	-		0.
c Total from continuation sheets to Part V	II Section A							137,329.				0.
d Total (add lines 1b and 1c)	ii, dection A							368,715.	80,804			0.
Total number of individuals (including but including	not limited to th	nose	liste	d at	DOVE	e) wh	no re	·	<del></del>	1		
compensation from the organization												2
										-	Yes	No
3 Did the organization list any former officer			e, ke	y en	nplo	yee,	or I	highest compensated e	mployee on			v
line 1a? If "Yes," complete Schedule J for  For any individual listed on line 1a, is the s							اهما		<b>.</b>	3		X
4 For any individual listed on line 1a, is the s and related organizations greater than \$15	•		•					•	ine organization	4	X	1
5 Did any person listed on line 1a receive or			-						dual for services			
rendered to the organization? If "Yes," cor										5		Х
Section B. Independent Contractors												
Complete this table for your five highest contains the complete this table for your five highest contains the contain									•	satio	n from	
the organization Report compensation for	the calendar y	ear (	endı	ng w	vith (	or w	<u>rthin</u>		/ear.			
<b>(A)</b> Name and busines:	address	NC	ONE	Ξ				<b>(B)</b> Description of s	ervices	(C) Compensation		
							İ					
				_								
							-+					
							ı					
							$\Box$					
							_					
2 Total number of independent contractors	including but a	ot li	miter	d to	thos	se lie	L	above) who received m	ore than			
\$100,000 of compensation from the organ		III			(			. 23010/ 1110 10061160 11	O.S tiluii			

See Part VII, Section A Continuation sheets

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Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under (B) (C) Related or Unrelated Total revenue exempt function husiness sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns 1b **b** Membership dues c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business Code** 2 a Member Dues 900099 350,375.1,350,375 Program Service Revenue 136,613. b Convention Income 900099 136,613. 511120 102,480. 102,480 c Advertising 100,000. d Retro Management Fee 541900 100,000 Chapter Events 900099 92,906. 92,906. 163,445. 900099 103,008. 60,437 f All other program service revenue 945,819. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 201,171 201,171. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 109,735.6 a Gross rents 55,406. **b** Less: rental expenses 54,329. c Rental income or (loss) 54,329 30,598. 23,731. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 6,089. assets other than inventory b Less cost or other basis 0 and sales expenses 6,089 c Gain or (loss) 6,089 6,089. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less. direct expenses c Net income or (loss) from gaming activities Þ 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Reimbursed expenses-HI 900099 48,789. 48,789 36,603. 36,603. Strategic Partnership 900099 c Reimbursed expenses-EF 900099 34,438. 34,438 36,304. 900099 36,304 d All other revenue 156,134. e Total. Add lines 11a-11d 363,542.1,839,036. 293,515. Total revenue See instructions 230,991. 232009 12-10-12

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).  Check if Schedule O contains a response to any question in this Part IX									
		(A)	(B)	(C)	(D)				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	( <b>D)</b> 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	Benefits paid to or for members				***************************************				
5	Compensation of current officers, directors,	368,715.							
	trustees, and key employees	300,713.							
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
7	persons described in section 4958(c)(3)(B) Other salaries and wages	762,240.			·				
8	Pension plan accruals and contributions (include	702/210.							
0	section 401(k) and 403(b) employer contributions)	43,026.							
9	Other employee benefits	103,614.							
10	Payroll taxes	105,003.			<del>=</del>				
11	Fees for services (non-employees).								
	Management								
b		21,186.							
С		13,772.	,						
d		107,782.							
е									
f	Investment management fees								
g	Other (If line 11g amount exceeds 10% of line 25,				<del></del>				
	column (A) amount, list line 11g expenses on Sch O)								
12	Advertising and promotion	8,855.							
13	Office expenses	158,679.							
14	Information technology	29,419.							
15	Royalties	01-000							
16	Occupancy	91,023.							
17	Travel	39,293.							
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	141 531							
19	Conferences, conventions, and meetings	141,521.							
20	Interest								
21 22	Payments to affiliates  Depreciation, depletion, and amortization	83,195.	<del>-</del>						
23	Insurance	13,929.							
24	Other expenses Itemize expenses not covered	13,723.							
	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)								
а	Income Taxes	70,146.							
b	Issues and Research Con	45,567.							
c	Repairs and Maintenance	14,516.			·				
d	Taxes - Business	10,205.							
е	All other expenses	<22,317.	>						
25	Total functional expenses. Add lines 1 through 24e	2,209,369.							
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)			1					

Form 990 (2012)
Part X Balance Sheet

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing	80,181.	1	98,463
	2	Savings and temporary cash investments	484,846.	2	611,114
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,624.	4	0
	5	Loans and other receivables from current and former officers, directors,	, , , , , , , , , , , , , , , , , , ,		
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	· "	8	
`	9	Prepaid expenses and deferred charges	16,640.	9	0
		Land, buildings, and equipment cost or other	· · · · · · · · · · · · · · · · · · ·		, , , , , , , , , , , , , , , , , ,
	ь	basis. Complete Part VI of Schedule D  Less: accumulated depreciation  10a 2,189,933.  10b 798,426.	1,454,155.	10c	1,391,507
	11	Investments · publicly traded securities	· · · · · · · · · · · · · · · · · · ·	11	
	12	Investments - other securities. See Part IV, line 11	11,000.	12	11,000
	13	Investments - program-related See Part IV, line 11	<del></del>	13	
	14	Intangible assets	9,162.	14	
	15	Other assets. See Part IV, line 11	12,452.	15	975
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,070,060.	16	2,113,059
	17	Accounts payable and accrued expenses	40,567.	17	25,594
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees,			TOTAL TO THE STATE OF THE STATE
Liabilities		key employees, highest compensated employees, and disqualified persons			
ا د		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	712,688.	23	661,433
	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 of			
		Schedule D	109,295.	25	36,665 723,692
	26	Total liabilities. Add lines 17 through 25	862,550.	26	723,692
-		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
S		complete lines 27 through 29, and lines 33 and 34.			
<u> </u>	27	Unrestricted net assets	1,207,510.	27	1,389,367
ğ	28	Temporarily restricted net assets		28	
ē	29	Permanently restricted net assets		29	
Ž		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
5		and complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	
ହୁଁ ।	24	Paid-in or capital surplus, or land, building, or equipment fund		31	
122	31	, , , , , , , , , , , , , , , , , , , ,			
IEI ASSE	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets or Fund Balances			1,207,510. 2,070,060.	32 33	1,389,367 2,113,059

Form **990** (2012)

Éorm	990 (2012) Washington Restaurant Association	91-05	86362	D۵	ge <b>12</b>
_	rt XI Reconciliation of Net Assets	31 03	00002	<u> </u>	ge iz
	Check if Schedule O contains a response to any question in this Part XI				X
			-		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,36		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,20	9,3	69.
3	Revenue less expenses. Subtract line 2 from line 1	3	15	4,1	73.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,20	7,5	10.
5	Net unrealized gains (losses) on investments	5	- 1		
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	2	7,6	84.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,38	9,3	67.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
	<u> </u>			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred audıt			

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

Form 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

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• {	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nam	e of organization			Empl	oyer identification number
	Washing	ton Restaurant	Association		91-0586362
Pa	rt I-A Complete if the or	ganization is exempt un	der section 501(c	e) or is a section 527 o	rganization.
2	Provide a description of the organic Political expenditures Volunteer hours	zation's direct and indirect polit	ical campaign activities	s in Part IV. ▶\$	
Pa	rt I-B Complete if the or	ganization is exempt un	der section 501(c	:)(3).	
1	Enter the amount of any excise tax			▶\$	
2	Enter the amount of any excise tax	incurred by organization mana	gers under section 495	<b>5</b> 5 <b>▶</b> \$	
3	If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.			\"	1/01
	•	ganization is exempt un		···	<del></del>
	Enter the amount directly expende		·		
2	Enter the amount of the filing organ	nization's funds contributed to d	other organizations for	_	
•	exempt function activities			▶\$	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO		
	line 17b	4400 DOI 645		▶ \$	Yes No.
	Did the filing organization file Form		TINN of all access 507 a		
5	Enter the names, addresses and en made payments. For each organization				
	contributions received that were pr				-
	political action committee (PAC). If				or granger rame or a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization.
					If none, enter -0-
		-			
	· · · · · · · · · · · · · · · · · · ·				

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

Schedule C (Form 990 or 990 EZ) 2012 Wash	ington	Restaurant	Association	91-	0586362 Page 2
Part II-A Complete if the organiza		mpt under section	n 501(c)(3) and file	ed Form 5768	
(election under section 5  A Check  If the filing organization beleaveness, and share of exception 1.2 contact the filing organization beleaveness.)	ongs to an aff	expenditures).		group member's na	me, address, EIN,
B Check If the filing organization check  Limits on Lo  (The term "expenditures"	obbying Expe	nditures		(a) Filing organization's totals	(b) Affiliated group totals
Table by the state of the state		(			-
<ul><li>1 a Total lobbying expenditures to influence p</li><li>b Total lobbying expenditures to influence a</li></ul>	. •				
c Total lobbying expenditures (add lines 1a	•	dy (direct lobbyling)			
d Other exempt purpose expenditures	2110 10)				
e Total exempt purpose expenditures (add I	nes 1c and 1	d)			-
f Lobbying nontaxable amount Enter the a		·	th columns		
If the amount on line 1e, column (a) or (b) is.		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,000	1	00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,000	_1	00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000,000		00 plus 5% of the exce	7 1		
Over \$17,000,000	\$1,000		7,000,000.		
0					
g Grassroots nontaxable amount (enter 25%			}		
h Subtract line 1g from line 1a. If zero or less	•		1		
i Subtract line 1f from line 1c. If zero or less	•	h	-t (I- F 4700		
j If there is an amount other than zero on ei reporting section 4911 tax for this year?	ther line 1n or	line 11, did the organiz	ation file Form 4720	_	Yes No
(Some organizations columns	that made a s				
Lo	bbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 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))				<del></del>	
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2012

### Schedule C (Form 990 or 990-EZ) 2012 Washington Restaurant Association 91-058636 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(b)		
of th	e lobbying activity.	Yes	No	Amo	ount	
1 a	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:  Volunteers?			. ,		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
9	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?		<del>- , , , , , , , , , , , , , , , , , , ,</del>			
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		····			
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<i>,_</i> ,			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)(	5), or se	ction		
			<del></del>	Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		Х	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X	
	t III-B Complete if the organization is exempt under section 501(c)(4), sect	on 501(c)(	5), or se	ction		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	! "No," OF	(b) Part	III-A, lir	ne 3, is	
	answered "Yes."					
1	Dues, assessments and similar amounts from members		1	1,350	374.	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical				
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a		<u>,193.</u>	
b	Carryover from last year		2b		<u>,977.</u>	
C	Total		2c		784.	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	513	3,142.	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex- does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	<u></u>	5	<709	<u>,926.</u>	
Par	uniternal					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, F	'art II-A (affilia	ited group	list); Part II	A, line 2;	
and I	Part II-B, line 1. Also, complete this part for any additional information					
				•		

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. ► See separate instructions.

2012
Open to Public Inspection

Name of the organization

Washington Restaurant Association

Employer identification number 91-0586362

Pa	rt I Organizations Maintaining Donor Advise	<del></del>	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		·
		(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)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised f	unds
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part I	
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (e.g., recreation or e		cally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structure	
	listed in the National Register		20
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the org	anization during the tax
	year ▶		•
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	rodic 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 during	the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	year ▶ \$
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170(h)(4)	)(B)(ı)
	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 stat	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes the o	organization's accounting for
	conservation easements.		
Pa	organizations Maintaining Collections of		r Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public s	service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
_	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical trea		n, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items.	
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
ь	Assets included in Form 990, Part X		<b>&gt;</b> \$

	dule D (Form 990) 2012 Washing									86362	
Par	t III Organizations Maintaining C	ollecti	ions of A	rt, Hist	orical Tr	easures, e	or Other	Simila	r Asse	<b>ts</b> (continu	ed)
3	Using the organization's acquisition, accession	on, and	other record	ds, check	any of the	following tha	it are a sigr	nificant u	se of its	collection i	tems
	(check all that apply):										
а	Public exhibition		•	ا 🖵 ا	Loan or exc	hange progra	ams				
b	Scholarly research		•	, 🗀	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections	s and expla	in how th	ey further t	he organizati	on's exem	ot purpo	se ın Par	t XIII	
5	During the year, did the organization solicit or	r receive	donations	of art, his	storical trea	sures, or oth	er sımılar a	ssets			
	to be sold to raise funds rather than to be ma	aintainec	as part of	the orgar	nization's co	ollection?				Yes	No_
Par	Escrow and Custodial Arrange reported an amount on Form 990, Par			ete if the	organizatio	on answered	"Yes" to Fo	orm 990,	Part IV,	ine 9, or	
1a	is the organization an agent, trustee, custodi			diary for	contribution	ns or other as	sets not in	cluded			
	on Form 990, Part X?									Yes	No
ь	If "Yes," explain the arrangement in Part XIII	and com	plete the fo	ollowina t	able:						
										Amount	
С	Beginning balance							1c			
	Additions during the year							1d			
	Distributions during the year							1e			<del>.</del>
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990	, Part X, line	21?						Yes	No
	if "Yes," explain the arrangement in Part XIII				n has been	provided in	Part XIII				
	t V Endowment Funds. Complete if										
			rrent year		rior year	(c) Two year		) Three ye	ars back	(e) Four ye	ears back
1a	Beginning of year balance										
b	Contributions							•			
С	Net investment earnings, gains, and losses										
d	Grants or scholarships									•	
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
9	End of year balance										
2	Provide the estimated percentage of the curr	rent year	end balanc	ce (line 1g	g, column (a	a)) held as					
а	Board designated or quasi-endowment			%							
b	Permanent endowment ►	%									
c	Temporarily restricted endowment ▶		%								
	The percentages in lines 2a, 2b, and 2c shou	ıld equal	100%								
3а	Are there endowment funds not in the posses	ssion of	the organiz	ation tha	t are held a	nd administe	red for the	organiza	ation		
	by:									Y	es No
	(i) unrelated organizations									3a(i)	
	(ii) related organizations									3a(ii)	
b	If "Yes" to 3a(II), are the related organizations									3b	
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm	i <b>ent.</b> Se	e Form 990	), Part X,	line 10.	.,					
	Description of property		a) Cost or c			or other		umulated	<b>d</b>	(d) Book v	alue
		bi	asis (investr	ment)		(other)	depre	ciation			
	Land					3,000.		<u></u>			,000.
Ь	Buildings	<u> </u>			1,05	7,434.	27	9,06	6.	778	368.
	Leasehold improvements	<u> </u>									
	Equipment	<u> </u>			72	9,499.	51	9,36	0.	210	139.
	Other						<del></del>				
Total	. Add lines 1a through 1e. (Column (d) must ed	aual Fori	m 990. Part	X. colum	nn (B), line 1	O(c))				1,391	.507.

Schedule D (Form 990) 2012

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

36,665.

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 Washington Restaurant Association	91-0586362 Page 5
Part XIII   Supplemental Information (continued)	
Part XII, Line 2d - Other Adjustments:	
Rental expenses posted against revenues	55,406.
Rounding	2.
Total to Schedule D, Part XII, Line 2d	55,408.
10001 00 00000010 07 1010 1117 1210 10	
Part XII, Line 4b - Other Adjustments:	
Loss on asset disposal	373.
· · · · · · · · · · · · · · · · · · ·	

### SCHEDULE J (Form 990)

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► See separate instructions

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

Washington Restaurant Association

red "Yes" to Form 990,
Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Service Attach to Form 990.

Employer identification number 91-0586362

OMB No 1545-0047

Pa	art I   Questions Regarding Compensation							
			Yes	No				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,							
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items							
	First-class or charter travel Housing allowance or residence for personal use							
	Travel for companions Payments for business use of personal residence							
	Tax indemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)							
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or							
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b						
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,							
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?							
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's							
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
	establish compensation of the CEO/Executive Director, but explain in Part III							
	Compensation committee   X Written employment contract							
	Independent compensation consultant Compensation survey or study							
	Form 990 of other organizations  X Approval by the board or compensation committee							
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing							
	organization or a related organization							
а	Receive a severance payment or change-of-control payment?	4a		Х				
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X				
C	4c		X					
c Participate in, or receive payment from, an equity-based compensation arrangement?  If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III								
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.							
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the revenues of:							
a	The organization?	5a						
b	Any related organization?	5b		<u> </u>				
	If "Yes" to line 5a or 5b, describe in Part III							
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the net earnings of.							
а	The organization?	6a		<u> </u>				
Ь	Any related organization?	6b						
	If "Yes" to line 6a or 6b, describe in Part III.							
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments							
	not described in lines 5 and 6? If "Yes," describe in Part III	7						
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the							
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8						
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	]						
	Regulations section 53.4958-6(c)?	9						

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

Schedule J (Form 990) 2012

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	Denemis	(a)-(i)(a)	reported as deferred in prior Form 990
(1) Anthony Anton	€	174,045.	0	0	0	0		0.
President & CEO	(ii)	18,360.	0.	0	0	0		0
	(0)							
	(1)							
	Θ							
	(ii)							
	Ξ							
	▣			:				
	(1)							
	▣							
	(9)							
	(ii)							
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Schedule J (Form 990) 2012

### SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

### 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

Department of the Treasury
Internal Revenue Service

Form 990 or 990-EZ or to pro

Attach to Fo

Employer identification number

Washington Restaurant Association	91-0586362
Form 990, Part VI, Section A, line 6: The organization i	s made up of
members.	
Form 990, Part VI, Section A, line 7a: Board members/gov	erning body are
elected on an annual basis by the membership.	
Form 990, Part VI, Section B, line 11: The Form 990 is r	eviewed by the
President and Vice President of Internal Operations price	r to submission to
the IRS. It is also reviewed by a member of the Finance	Committee.
Form 990, Part VI, Section B, Line 12c: Board and staff	review conflicts
of interest on an annual basis.	
Form 990, Part VI, Section B, Line 15: Executive Directo	r's compensation
is reviewed and approved by the Board on an annual basis	•
Upper management positions are also reviewed and approve	d by the Board on
an annual basis.	
Form 990, Part VI, Section C, Line 19: All documents are	available upon
request. Tax returns can be accessed on the Washington	State Charities
website.	
Form 990, Part XI, line 9, Changes in Net Assets:	
Adoption of change in modified cash basis definition	27,684.

Form 990, Part XII, line 2c

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (F	orm 990 or	990·EZ) (2	2012)										Page 2
Name of the o				ton Re	staur	ant 1	Assoc	ciation			Employer 91-0	identification	n number
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auditor	selec	ction	•	_									
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Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

### Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

2012 Open to Public Inspection OMB No 1545-0047

**Employer identification number** 91-0586362

► See separate instructions. Washington Restaurant Association ► Attach to Form 990. Name of the organization

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Parti

Direct controlling End-of-year assets <u>e</u> Total income ₤ Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) Part III

(g) on 512(b)(13) ontrolled entity?	°		×					
(g) Section 512(b)(13) controlled entity?	Yes							
(f) Direct controlling entity							-	
(e) Public charity status (if section	501(c)(3))		Line 11a, I					
(d) Exempt Code section			501(c)(3)					
(c) Legal domicile (state or foreign country)			Washington					
(b) Primary activity			Promote Education					
(a) Name, address, and EIN of related organization		WRA Education Foundation - 91-1686716	Olympia, WA 98501					

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

Schedule R (Form 990) 2012

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Page 2 91-0586362

Schedule R (Form 990) 2012 Washington Restaurant Association

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(j) (k) . General or Percentage managing ownership partner?		
General or managing partner?		
(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		
(h) Disproportion- ate allocations?		
(g) Share of end-of-year assets		
(f) Share of total income		
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		
(d) Direct controlling entity		
(c) Legal domicile (state or foreign		
(b) Primary activity		
(a) Name, address, and EIN of related organization		

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year ) Part IV

(a)	(q)	(0)	(D)	(e)	€	(6)	ε	€
Name, address, and EIN of related organization	Pnmary activity	Legal domicile (state or foreign	Direct controlling Type of entity (C corp, S corp,	Type of entity (C corp, S corp,	Share of total income	Share of end-of-year	Percentage ownership	Section 512(b)(13) controlled entity?
		country)		fign in	-	desers		Yes No
WRA Member Services Corporation - 91-2003345			Washington					
510 Plum Street SE, Suite 200			Restaurant					
Olympia, WA 98501	Services	WA	Association	C CORP	199,024.	187,256.	1008	<u>×</u>
WRA Retro Trust - 91-6517957								
510 Plum Street SE, Suite 200								
Olympia, WA 98501	Trust	WA	N/A	TRUST	N/A	N/A	N/A	×
			-					
	11							
232162 12-10-12		28				Sche	Schedule R (Form 990) 2012	990) 20

Page 3

# Part V Transactions With Related Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	.8
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	elated organizations listed i	n Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				19		×
<ul> <li>b Gift, grant, or capital contribution to related organization(s)</li> </ul>				16	į	×
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan guarantees to or for related organization(s)				10		×
e Loans or loan guarantees by related organization(s)				<b>1</b> e		×
<ul><li>f Dividends from related organization(s)</li></ul>				÷		×
g Sale of assets to related organization(s)				19		×
h Purchase of assets from related organization(s)				4		×
i Exchange of assets with related organization(s)				Ę		×
j Lease of facilities, equipment, or other assets to related organization(s)				1,		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
l Performance of services or membership or fundraising solicitations for related organization(s)	lanization(s)			=	×	
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			£		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			Ę		×
Sharing of paid employees with related organization(s)				9		×
			•			
p Reimbursement paid to related organization(s) for expenses				10		×
q Reimbursement paid by related organization(s) for expenses				19	×	
r Other transfer of cash or property to related organization(s)				+		×
s Other transfer of cash or property from related organization(s)				18		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete the	is line, including covered r	elationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
WBA Betro Trust	-	000				
	1					
(2) WRA Education Foundation	a	45,483.			•	
(3)						
(4)						
(5)				,		
(9)						
232163 12-10-12	29		Schedule R (Form 990) 2012	R (Forn	990 ر	2012

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## Schedule R (Form 990) 2012 Washington Restaurant Association

Part Vi Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

3	entage ership																				1 2012
_	or Perce	0				 		 						 -						 	980
9	General managin partner	Yes No			-								 					 			
()	Ospropor- Code V-UBI General or Percentage tonate amount in box 20 managing ownership allocations? of Schedule K-1 partner?	(Form 1065)																			Schedule R (Form 990) 2012
Ξ	spropor- tionate cations?	Yes No					 		 								<u> </u>				1
	<u> </u>	<u>*</u>	 			 									 <del></del>		+	 	 -	 	1
(6)	Share of end-of-year	assets																			
æ	Share of total	псоте																			
<u> </u>	partners sec 501(c)(3) orgs ?	Yes No	 						 			 	-		 						-
	lated,	12-514)														-				 	
Ð	Predominant income pa (related, unrelated, excluded from fax	under section 5																			
	g ş														,			 			
<u>(</u> )	Legal do state or	country)																			
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_	Primary activity									<u>.</u>											
<u> </u>	птагу									i											
	п.																				
	N EIN P																				
(a)	Name, address, and EIN of entity																				
_	e, addi of e																				
	Nam																				

232164 12-10-12

Schedule R	(Form 990) 2012	Washington	Restaurant	Association	91-0586362 Page 5
Part VII	(Form 990) 2012  Supplemental Infor	mation			
L	Complete this part to pro	vide additional informat	ion for responses to a	questions on Schedule R (see instr	uctions)
	complete this part to pro	vide additional informat	ion for responses to g	destrous ou ochequie in (see matr	uononaj.
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Part VII Section A. Officers, Directors, T	rustees, Key E								yees (continued)	
(A) Name and title	(B) Average hours			)) Pos	C) sition	)		( <b>D)</b> Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustæe	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) Bruce Beckett	40.00					,,		127 220	7 500	_
mployee					-	X	_	137,329.	7,500.	(
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otal to Part VII, Section A, line 1c								137,329.	7,500.	