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Form **990-EZ** 

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning , 2013, and ending , 20										
B	Check if ap	opticable.	C Name of organization	D En	mployer identification number					
	Address c	hange	Juanita Elementary PTA 2.8.25		91-1029344					
_	Name cha	· 1	Number and street (or P.O box, if mail is not delivered to street address)  Room/s	urte E Te	E Telephone number					
_	Initial retur		1304 South Fawcett Ave 30	0	206-963-0398					
=	Amended	_	City or town, state or province, country, and ZIP or foreign postal code	F G	roup Exem	ption				
_	Application		Tacoma, WA 98402	N	umber 🕨					
G .	Account	ting Method:	✓ Cash	H Chec	k ▶ 🗹 if	the organization is not				
1 1	<b>Nebsite</b>	o: ►				ch Schedule B				
J T	ax-exen	npt status (che	ck only one) — ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 52	7 (Form	990, 990-	EZ, or 990-PF).				
	Form of organization: Corporation Trust Association Other									
L	Add lines	s 5b, 6c, and	7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or	if total asse	ets	<del> </del>				
(Pa	rt II, col	umn (B) belov	v) are \$500,000 or more, file Form 990 instead of Form 990-EZ		► s	76935				
	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see							
			the organization used Schedule O to respond to any question in this I							
	1		ns, gifts, grants, and similar amounts received		1	42626				
	2		ervice revenue including government fees and contracts		2	15266				
	3	_	ip dues and assessments		3	13200				
	4	Investment	•		4	72				
	5a		unt from sale of assets other than inventory   5a		+ +					
Revenue	b		or other basis and sales expenses		-					
	C	Gain or (los	- 5c							
	6	Gaming an		30						
	a	Gross ince								
				430	14					
Š	b		me from fundraising events (not including \$ 46881 of contrib	outions	1 1					
æ			aising events reported on line 1) (attach Schedule G if the							
		sum of suc	h gross income and contributions exceeds \$15,000) 6b	1466	57					
	С	Less: direc	3							
	d	Net income	:							
		line 6c) .			6d	8808				
	7a	Gross sale:	s of inventory, less returns and allowances		_					
	b	Less: cost	of goods sold		_					
	С	Gross profi	t or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c					
	8		nue (describe in Schedule O)		8					
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<u></u>	9	66772				
	10		similar amounts paid (list in Schedule O)		10	5187				
	11		ild to or for members		11					
9	12		her compensation, and employee benefits		12					
SE.	13		al fees and other payments to independent contractors		13	3000				
Expenses	14		$\gamma$ , rent, utilities, and maintenance $\dots$ $\gamma$		14					
Ш	1 .0		iblications, postage, and shipping		15	86				
	16		nses (describe in Schedule O)		16	36256				
	17	Total expe	17	44529						
ম	18		deficit) for the year (Subtract line 17 from line 9)		18	22243				
Se	19		or fund balances at beginning of year (from line 27, column (A)) (must	agree with						
As			r figure reported on prior year's return)		19	34203				
Net Assets	20		ges in net assets or fund balances (explain in Schedule O)		20	(53)				
_	21	Net assets	21	56393						
	Panery	mark Darkinski	on Act Nation and the concepts instructions			5 000 E7 mass				

Cat. No. 106421

	90-EZ (2013)		EI PTA 2	8.25 91-1	0	29344 Page 2
Par	Balance Sheets (see the instructions to Check if the organization used Schedule		ny question in this	Part II	_	
	Official in the organization data confeder	o to respond to di	iy quoottori iii tiilo	(A) Beginning of year	<u> </u>	(B) End of year
22	Cash, savings, and investments		[	34203	22	56393
23	Land and buildings		[		23	
24	Other assets (describe in Schedule O)		[		24	
25	Total assets		[	34203	25	56393
26	Total liabilities (describe in Schedule O)				26	
27	Net assets or fund balances (line 27 of column				27	56393
Part		•		·		Expenses
	Check if the organization used Schedule	•				quired for section
	. , , , , ,	To support the education				(c)(3) and 501(c)(4) anizations and section
as m	ribe the organization's program service accompli easured by expenses. In a clear and concise mans benefited, and other relevant information for ea	nanner, describe the			494	17(a)(1) trusts; optional others.)
28	Student Support, Enrichment & Education - Field Tri	ps, Outdoor Educatio	n (56 Students), Art I	Docent Program		
	(All Students ~330)Classroom Support(All Students	-330) , books (All Stu	dents ~330),			
	Stem Night (Families & Community event), Safety(Al					
		includes foreign gra			28	2175 <u>6</u>
	Parent Envolvement and Training - Board Trainings,	free volunteer trainin	g, family events such	as Carnival and		
	Bingo and Movie night.					
	(Grants \$ ) If this amount		29:	2515		
	Community Services and Volunteer programs - Pant	includes foreign gra			25	3515
•	Community Services and Volunteer programs - Parti	y Packs, night School	i Scriviai Sriips, Vuiui	ileer Awarus		
	(Grants \$ ) If this amount	includes foreign gra	nts, check here .	<b>&gt;</b> 🗆	30	a 1688
	Other program services (describe in Schedule O)					
		includes foreign gra	nts, check here .	▶ 🗆	31	a
32	Total program service expenses (add lines 28a	through 31a)		<b>&gt;</b>	32	26959
Part	,,,,,,,,,,,,,,,,				str	ictions for Part IV)
	Check if the organization used Schedule	O to respond to ar				<u> </u>
		(b) Average	(c) Reportable compensation	(d) Health benefits, contributions to employe	e (e	Estimated amount of
	(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC)	benefit plans, and	- 1	other compensation
		,	(if not paid, enter -0-)	deferred compensation	1	
Nick S	Steen - Co-President	5-10	_			_
		· · · · · · · · · · · · · · · · · · ·	0	<u> </u>	ᅆ	0
Chery	l Crandall - Co-President	5-10	_		اہ	•
Dhulli	o Dierro Conretory		0		<u> </u>	<u> </u>
Pilyiii	s Pierce - Secretary	2	o		o	0
Stonh	anie Dunniway - Treasurer				ᠳ-	<u> </u>
Stebii	ane Dunnway - Treasurer	- 5	o	,	اه	0
Molly	Ely - VP Volunteer Services				┧-	
		5-10	o	,	اه	0
Alliso	n Clevenger - VP Volunteer Services	5.40			1	
		5-10	o		o	0
Kristy	Lloyd - VP Hospitality	5-10			Т	
		3-10	0		0	0
Jenni	fer Nichols - VP Hospitality	5-10		1		
			0		0	0
Chery	l Higgins - VP Ways and Means	5-10		}		
			0		<u> </u>	0
		<u> </u>			+	
		-				
					+	
		-[			1	

rail	instructions for Part V) Check if the organization used Schedule O to respond to any question in this				
	abilitabiliti for all 4/ Oricok ii the organization aded conteadio o to respond to any question in the		Yes	No	
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		<u> </u>	
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the				
35a	change on Schedule O (see instructions)	34		<u> </u>	
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		/	
c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1	
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions   Did the organization file Form 1120-POL for this year?	37b		~	
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		~	
b	If "Yes," complete Schedule L, Part II and enter the total amount involved				
39	Section 501(c)(7) organizations. Enter:	1			
a	Initiation fees and capital contributions included on line 9	-			
40a					
b					
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization				
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		<u>/</u>	
41	List the states with which a copy of this return is filed ▶				
42a	The organization's books are in care of ►  Located at ►  Telephone no. ►  ZIP + 4 ►				
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		···	
	If "Yes," enter the name of the foreign country: ▶				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		<u>/</u>	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	• •	. I	<b>▶</b> □	
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No 🗸	
þ	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		·	
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		<u> </u>	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44d 45a		· /	
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	-va			
	Form 990-EZ (see instructions)	45b			

Page 3

		•	91-1029344 Juanita El DTA 2.8.25								
Form 99	0-EZ (2	013)	<del> </del>	Juanita 1	<u> </u>	+ 2.8.25		Ye	Page 4		
<b>46</b>	Did t to ca	he organization engage, directly or in indidates for public office? If "Yes," o	ndirectly, in political c complete Schedule C	ampaign activities	on behalf	of or in oppos	sition	16	s No		
Part		Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51. Check if the organization used Sch	s <b>only</b> s must answer que	stions 47-49b ar	nd 52, an	d complete t		s for li	nes		
		Check it the organization used oci	riedule O to respond	to any question i	II tills Fai		<del>····</del>	Ye	s No		
47		he organization engage in lobbying If "Yes," complete Schedule C, Part		section 501(h) elec		fect during the	ſ	17 V	,		
48 49a b	Did to	s the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization make any transfers to an exempt non-charitable related organization?									
50		piete this table for the organization's oyees) who each received more than									
		Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	(d) i contribu	lealth benefits, utions to employee plans, and deferred ompensation	(e) Estir	nated am	nated amount of compensation		
						<del></del>	ļ				
									· . <u>-</u>		
							1				
51	Com	number of other employees paid over plete this table for the organization' ,000 of compensation from the orga	s five highest compo		ent contra	ctors who eac	ch receiv	ed moi	e than		
	(a)	Name and business address of each independ	lent contractor	(b) Type of	(	(c) Compensation					
							· /				
					<del></del>		·				
								<del></del>			
d	Total	number of other independent contra	ictors each receiving	over \$100,000 .	. •						
52		he organization complete Schedule A xempt charitable trusts must attach a				947(a)(1)	<b>▶</b> ☑ Y	'es □	No		
Under p	enalties rect, an	of perjury, I declare that I have examined this rid complete. Declaration of preparer (other than	eturn, including accompan officer) is based on all info	ying schedules and state ormation of which prepai	ements, and er has any k	to the best of my l nowledge.	knowledge	and belie	f, rtıs		
Sign		Signature of officer				11-15- Date	14				
Here		Stephanie Dunniway - Juanita Elementary PTA Treasurer Type or print name and title									
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature	The Date Check I if self-employed				N			
Use (		Firm's name >				Firm's EIN ▶					
		Firm's address ► discuss this return with the preparer	instructions		Phone no.	<b>▶</b> □ v	'es 🗍	No			

### SCHEDULE A (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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the organization							Employer i	dentificatio	n number	
	ita Elementary PTA							91-1029344			
Pa			rity Status (All orga						nstructi	ons.	
The 6 1 2 3 4	A church, cor A school desc A hospital or A medical res	nvention of churc cribed in section a cooperative ho	ation because it is: (Fo thes, or association of a 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjun	churche ch Sched ation des	s describ lule E.) cribed in	ed in sec section	tion 170: 170(b)(1)	(b)(1)(A)(i (A)(iii).	•	)(iii). Enter th	e
5	☐ An organizati		the benefit of a colle	ge or un	iversity o	wned or	operated	by a go	vernmen	tal unit desc	ribed in
6 7	=										
9											
10 11	= 0										
e	other than for or section 509	this box, I certify undation manage 9(a)(2).	II c Type II that the organization ers and other than one a written determination	is not co e or more	ntrolled o	firectly or support	r indirectl ed organ	y by one zations o	or more described	in section 5	oersons 609(a)(1)
	organization,	check this box								oe III suppor	· 🗆
g	following pers		he organization accep	pted any	gm or co	ontributio	n from a	iny of the	•		
			ndirectly controls, eitlody of the supported of					describe	d in (ii) a	nd Ye	s No
			on described in (i) abo	_						11g(ii)	+
			a person described in							11g(iii)	
h	<del> </del>	<del></del>	on about the support								
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (ii) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	s the tion in col zed in the S?	(vii) Amount of suppor	•
				Yes	No	Yes	No	Yes	No		
(A)											
(B)											
(C)											
(D)											·
(E)											
											<del></del>

Page 2

Part	(Complete only if you checked th	ne box on line	5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
C4	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	ion A. Public Support  idar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2003	(6) 2010	(6) 2011	(4) 2012	(e) 2010	(i) Total
2	Tax revenues levied for the organization'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						
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)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support  dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	(a) 2009	( <b>b)</b> 2010	(6) 2011	(u) 2012	(e) 2013	(i) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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.)						
11 12 13	Total support. Add lines 7 through 10 [Gross receipts from related activities, etc. First five years. If the Form 990 is for the	e organization	's first, secon	d, third, fourth	, or fifth tax ye		
Secti	organization, check this box and stop her on C. Computation of Public Suppor				<del></del>		· · <b>&gt;</b> [
14	Public support percentage for 2013 (line 6			1, column (f))		14	%
15	Public support percentage from 2012 Sch	edule A, Part I	II, line 14 .			15	%
16a	331/3% support test — 2013. If the organize box and stop here. The organization qual						
b	331/3% support test—2012. If the organicheck this box and stop here. The organic					15 is 33½% 	or more,
17a							
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization Explain in Part IV how the organization me supported organization	ion meets the eets the "facts	facts-and-ci- and-circums-	rcumstances" tances" test. T	test, check th	is box and <b>st</b> end qualifies as a	and line op here. publicly
18	Private foundation. If the organization did						

91-1029344

### 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 qualify under the tests listed below, please complete Part II.)

Section A. Public Support							
Calen	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	40507	40504			440000	407404
2	Gross receipts from admissions, merchandise	13537	18594	22599	29778	\$42626	127134
-	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	8267	31835	24445	20394	34237	110170
3	Gross receipts from activities that are not an	0207	31035	24445	20394	34237	119178
	unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf	_0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	21804	50429	47044	50172	76863	246312
7a	Amounts included on lines 1, 2, and 3						
_	received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	ا	0	ام		o	0
С	Add lines 7a and 7b	0	0	0	0	0	
8	Public support (Subtract line 7c from						
	line 6.)						246312
Secti	on B. Total Support			,		· · ·	
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	21804	50429	47044	50172	76863	246312
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	l		-			
	royalties and income from similar sources .	0	0	0	43	72	115
b	Unrelated business taxable income (less	i					
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	O	0	0	0
_	Add lines 10a and 10b	0	0	0	43	72	115
11	Net income from unrelated business activities not included in line 10b, whether			·			
	or not the business is regularly carried on	o	0	٥		o	
12	Other income. Do not include gain or			0	0	<u>_</u>	0
'-	loss from the sale of capital assets	i					
	(Explain in Part IV.)	أه	o	o	o	o	0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	21804	50429	47044	50215	76935	246427
14	First five years. If the Form 990 is for the	e organization	's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	
	organization, check this box and stop he			<u></u>	<u> </u>	· · · · ·	· · 🕨 🗀
<u>Secti</u>	on C. Computation of Public Suppor						. <u> </u>
15	Public support percentage for 2013 (line 8	,	•	3, column (f))		15	99.95 %
16	Public support percentage from 2012 Sch			<del></del>	<del></del>	16	99.97 %
	on D. Computation of Investment In				(0)	1 4= 1	
17	Investment income percentage for 2013 (					17	.0004 %
18	Investment income percentage from 2012					18	.0002 %
19a	331/s% support tests—2013. If the organ 17 is not more than 331/s%, check this box						
ь	331/s% support tests—2012. If the organiz		_			-	_
D	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di		_				

Part IV	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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

## **Political Campaign and Lobbying Activities**

2013 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ See separate instructions.
 ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

Inspection

• Se	ction 501(c)(3) organizations:	Complete Parts I-A and B. Do not con	nplete Part I-C.		
• Se	ction 501(c) (other than section	on 501(c)(3)) organizations: Complete F	Parts I-A and C belo	w. Do not complete Part I-B	•
	ction 527 organizations: Con	•			
	•	," to Form 990, Part IV, line 4, or For		· · · ·	-
		that have filed Form 5768 (election und		· ·	
	· // ·	that have NOT filed Form 5768 (election). To Form 990, Part IV, line 5 (Proxy		· "	<del>-</del>
	ction 501(c)(4), (5), or (6) orga	• • • •	Tax) or Form 990-6	2, Part V, IIIIe 350 (Proxy	ax), uren
	of organization	ilizations. Complete Fart III.		Employer ide	ntification number
Juanita	Elementary PTA 2.8.25				91-1029344
Part		e organization is exempt und	er section 501(	c) or is a section 527	
1	Provide a description of t	the organization's direct and indire	ct political campa	ign activities in Part IV.	
2	Political expenditures .				
3	Volunteer hours				•••••
_			11 504/	WAN	· · · · · · · · · · · · · · · · · · ·
Part	<del></del>	e organization is exempt und	<u></u>		<u> </u>
1 2	•	excise tax incurred by the organiza excise tax incurred by organizatior			r
3		ed a section 4955 tax, did it file For	_		Yes No
4a	<del>-</del>	· · · · · · · · · · · · · · · · · · ·			Yes No
	If "Yes," describe in Part				
Part		e organization is exempt under	er section 501(	c), except section 501	(c)(3).
1		ly expended by the filing organiz			· · · · · · · · · · · · · · · · · · ·
	activities			<b>. &gt;</b> \$	S
2		filing organization's funds contrib	_		
		vities			} 
3		expenditures. Add lines 1 and 2.			
				`	
4		n file Form 1120-POL for this year			Yes No
5		ses and employer identification nur			
		ents. For each organization listed, on tributions received that were pro-			
		fund or a political action committee			
		i		I	T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization. If
					none, enter -0
(1)					
(2)		<b></b>			
	<u> </u>				<del></del>
(3)					
	<u> </u>		<del></del>	-	<del>                                     </del>
(4)		<b></b>			
(5)					
(5) 					
(6)					

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	1 5768	,	
For A	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(	B)		(b)	
	ription of the lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or					
_	referendum, through the use of:		,	ļ		
a	Volunteers?	<del> </del>	7	1		
b D	Media advertisements?		<u></u>	1		
ď	Mailings to members, legislators, or the public?		7		<del></del>	
е	Publications, or published or broadcast statements?		~			
f	Grants to other organizations for lobbying purposes?	~				300
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		~			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		~			
i	Other activities?	<u> </u>	~			
J	Total. Add lines 1c through 1i	ł				300
2a b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? ff "Yes," enter the amount of any tax incurred under section 4912	<u> </u>	-			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	ĺ		i —		
ď	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		,			
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	)(5), (	or se	ction		
	501(c)(6).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3		
1	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," 0 answered "Yes."  Dues, assessments and similar amounts from members				line	3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).		•			
а	Current year		2a			
þ	Carryover from last year		2b	ļ		· · · · · ·
C	Total		2c			
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		3			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?					
5	Taxable amount of lobbying and political expenditures (see Instructions)	•	5			
	Supplemental Information	<del></del>		L		
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up lis	t); Pai	rt II-A,	line 2;	and
	-B, line 1. Also, complete this part for any additional information.					
Paid \$	300 to the Lake Washington Citizens Levy Committee.					

91-4029344 Page 2

	9000 O (1 0111 330 01 330 LZ) 2013		_			Page <b>Z</b>
	rt II-A Complete if the organization section 501(h)).				·	
A	Check ► ☐ if the filing organization beloname, address, EIN, expense					up member's
В	Check ▶ ☐ if the filing organization che	-			•	
	Limits on Lobby			•	(a) Filing	(b) Affiliated
	(The term "expenditures" me			.)	organization's totals	group totals
1	a Total lobbying expenditures to influence	oublic opinio	n (grass roots lobby	ring)		
	b Total lobbying expenditures to influence a					
	c Total lobbying expenditures (add lines 1a	and 1b) .				
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (add					
	f Lobbying nontaxable amount. Enter the columns.	ne amount	from the following	table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amoun	t is:		
	Not over \$500,000	20% of the a	mount on line 1e.			i I
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	us 15% of the excess	over \$500,000.		•
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.		1
	Over \$1,500,000 but not over \$17,000,000	ver \$1,500,000.		1		
	Over \$17,000,000					
	g Grassroots nontaxable amount (enter 259					
	h Subtract line 1g from line 1a. If zero or les					
	i Subtract line 1f from line 1c. If zero or les	-,				
	j If there is an amount other than zero					☐ Yes ☐ No
	reporting section 4911 tax for this year?			• • • • •		res no
	(Some organizations that mad columns below. S	le a section ee the instru	uctions for lines 2a	not have to com through 2f on pa		
	Lobbying Lobby I	Expenditure	s During 4-Year A	veraging Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
2	a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					
				•		

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (For	π 990 or 990-EZ) 2013	91-1029344 Page 4				
Part IV	Supplemental Information (continued)	r age v				
	•					
		······				

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

#### 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.

20**13** 

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

91-1029344 Juanita Elementary PTA 2.8.25 Line 1 Jag-A-Thon Fundraiser (Run-A-Thon) \$28,638.09 Jag-A-Thon Physical Donation Values \$2,957.00 Box Tops \$1,874.26 \$1,121.96 Amazon \$268.00 Microsoft Volunteer Hours McDonalds Night Fundraiser \$577.71 Menchies Night Fundraiser \$200.00 DQ Night Fundraiser \$710.00 \$2,250.00 Membership Dues Corporate Sponsors \$505.00 Outdoor Ed Cash Donations \$582.22 Outdoor Ed Scholarships Grant \$804.00 Summer Reading Grant - LW Schools Found. \$2,103.00 \$35 Total Line 1 Income - \$42,626.24 Misc Income Line 2 Yearbook Sales \$4,138.00 Fathers Day Breakfast \$235.00 All School Play \$4,838.72 Movie Night \$1,492.95 Meet and Greet Ice Cream Social \$284.80 Outdoor Ed Parent Payments \$4,254.75 \$22.00 Stem Night Total Line 2 Income - \$15,266.22 Line 4 Bank Interest \$72.21 Total Line 4 Income - \$72.21

Schedule O (Form 990 or 990-EZ) (2013)		Page 3
Name of the organization  Juanita Elementary PTA 2.8.25		Employer Identification number 91-1029344
Line 16 cont		
Box Tops	\$39.99	
Bingo	\$535.48	
Carnival	\$1,975.94	
Movie Night	\$751.09	
Ice Cream Social	\$285.33	
Art Docent Program	\$769.84	
Reading Specialist	\$265.98	
Stem Night	\$208.68	
Membership Incentives	\$29.96	
Hospitality	\$72.30	
Staff Appreiciation	<b>\$</b> 552.24	
Reflections	\$98.78	
Volunteer Appreciation	\$155.00	
PTA Meeting Childcare	\$200.00	
Awards	\$330.30	
Conventions/Founders Day	\$150.00	
Office Supplies	\$51.46	·
Insurance	\$265.00	
Bank Charges	\$20.00	
Summer Reading Program	\$2,942.29	
Library/Classroom Books	\$336.11	
Field Trip Scholarships	\$30.00	
5th Grade Graduation	\$90.80	
Watch Dogs Program	\$879.70	
Safety Supplies	\$250.03	
Pantry Packs	\$534.43	
Credit Card Machine	\$251.00	

Name of the organization		<del></del>	E	Employer identification number
Juanita Elementary PTA 2.8.25	<del></del>			91-1029344
ine 16 cont				
Gambling License	\$115			
Board Member Training	\$200.00			
PTA Website Fee	\$264.98			
Wa State Incorporation Fee	\$10			
				**
Popcorn Machine/Cart	\$386.31			
Stamps	\$85.80			
5th Grade "Legacy to schoo	l" Gift \$487.40			
Outdoor Ed Camp Expenses	\$14,309.0	3		
Play Expenses \$1,155.3	8	Total Line 16 Expenses	\$36,256.41	
Line 20				······
Rounding and Balance co	rrection from previo	us year \$53.00		
ine 28				
Classroom Support	\$2,605.61	Art Docent Program	\$769.84	
Reading Specialist	\$265.98	Stem Night	\$246.62	
Summer Reading Program	\$2,942.29	Library/Classroom Books	\$336.11	
Field Trip Scholarships	\$30.00	Safety Supplies	\$250.03	
Outdoor Ed Camp	\$14309.03			
Total Line 28 - \$21,755.51				
Line 29				
Membership Incentives	\$29.96	Convention/Founders day	\$150.00	
Movie Night	\$751.09	Hospitality (meeting snacks)	\$72.30	
Bingo	<b>\$</b> 535.48	Carnival	\$1,975.94	I
			¥1,010.04	
Total Line 29 - \$3,514.77				
ine 30				······································
HS Scholarship	\$500.00	Scholarship Basket	\$68.00	
Scholarship Fund	\$100.00	Awards	\$330.30	
Pantry Packs	\$534.43	Volunteer Appreciation	\$155.00	Total Line 30 - \$1,687.73