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Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

	ILLI TYCYTA												
<u> </u>	For th	e 2013 calen	dar year, or ta					13, and			15 -		1
В	Check if	applicable	C Name of organ	ilzation Wes	t Africa	n Vocat	ional	Schoo	ols	(WAVS)	D Emplo	yer iden	tification Number
	Add	dress change	Doing Busines		t Africa			Schoo				2028	
	Nai	me change	Number and s	treet (or P.O. box	of mail is not delive	ered to street a	ddress)		Room/s	sulte	E Teleph	one num	ber
	Initi	iał return	PO Box 25	455							(36	(0) E	68-1112
	Ter	minated	City or town, s	tate or province,	country, and ZIP o	or foreign postal	code				1		
	Am	ended return	Seattle				W	IA 98	3165		G Gross	receipts	\$ 185,832.
	HADI	plication pending	F Name and add	iress of principal	officer		•			H(a) Is this	a group retur	n for sub	
	ш		Tom Zerke	-1 18452 -	47th Pl Ni	E Lake For	est Park	WA 981	55-4354	H(b) Are all	subordinates	Included	17 Yes No
$\overline{}$	Tax-e	exempt status	X 501(c)(3)	501(c) (sert no)	4947(a)(1		527	If 'No,'	attach a list.	(see Inst	ructions) — —
j			w.WAVScho		, , ,,,,,	30/11/07	1777(4)(1	, u.	102.	M(c) Group	exemption n	umber I	•
K		of organization	X Corporation	Trust	Association	Other -		L Year o	f formatic	, , ,			legal domidle WA
Pa		, 		illust	Association	Other		L real o	noimauc	200	0 144	31218 OI	egai domicie WA
Pa		Summar Broffy describ	y oe the organiza	tion's mission	or most sign	dicant active	tion	C			_+	.1	-b1d
		-	_		_			Supp	orti	ng voc	ationa	11 TS	chools_and
9		economic	developm	ent pro	grams in	_west_A	IIIca_						
ם						- -							
Ze.	2	Check this bo			discontinued				 				
Ĝ			ting members of	•		•						3	1 7
Activities & Governance			drig members t dependent votir									4	/ 0
ies :	1		of individuals e	_	-		-	•				5	1
:≅:			of volunteers (6	30
Act			d business rev									7a	0.
			business taxal									7b	<u> </u>
						<u></u>		·			rior Year	•	Current Year
	8	Contributions	and grants (Pa	rt VIII, line 1	n)						104,		146,799.
Revenue			ce revenue (Pa	-	•							<u> </u>	110,733.
N.			come (Part VIII								45.	876.	32,785.
æ			e (Part VIII, coli									<u> </u>	6,248.
į			्र दशक्त प्रेप ्ट १								150,	199.	185,832.
			milar emounts								<u>-</u> _	747.	98,534.
			to or for memb								10)	, , , , .	30,331.
	15	Salaries othe	r[¢@npjenseati@r	n setro nove a	henefits (Part	IX column	(A) lines 5	-10)			16	109.	51,756.
Expenses			undraising fees								10,	105.	31,730.
Ĕ		K I		100						·			
នឹ	b	Total fundrals	ing expenses (Part IX; colu	nn (D), line 25	5) -		5,9	<u>990.</u>	ļ			
-	17	Other expens	es (Partix, bol	limin (A), lin ie	s 11a-11d, 11	f-24e) · ·					34,	716.	44,731.
	18	Total expense	es. Add lines 13	1-17 (must ed	jual Part IX, co	olumn (A), li	ne 25) .			. [121,	572.	195,021.
	19	Revenue less	expenses. Sub	stract line 18	from line 12						28,	627.	-9,189.
0 9										Beginni	ng of Curre	nt Year	First 634
Lesots Balany	20	Total assets (Part X, line 16)								525,		515,941.
₹ <u>Б</u>	21	Total liabilities	s (Part X, line 2	6)							,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
žį	22	Net assets or	fund balances.	Subtract line	21 from line	20					525,	130	515,941.
Pa	rt II	Signatur	e Block	· · · · · · · · · · · · · · · · · · ·						. L	0207		313/311.
			dare that I have exam	mined this return	Including accomp	anving schedule	ne and etatem	ente end i	In the he	et of my know	d has abbah	aliaf It le	Inia correct and
com	olete. De	deration of prepar	er (other than officer) is based on all	information of which	h preparer has	any knowledg	je.	10 416 00.	st of my know	neuge and be		uue, correct, aria
			25/1	1 Pate	1						4 Au	1	2014
Sig	ın	Signatu	e of officer							D	ate		
He		Cyn	thia Robe	rta 7	Reasu	0.0					•		
	. •		print name and title	103 ,	/CEAS	1 ICCIC	· · · · ·						
		Print/Type n	reparer's name		Preparer's signa	ature		Dat	te		Chart	X if	PTIN
_		1	·		/ _	AGK		14	·	טום2.	Check	_	
Pa			a A Robe		1 lym		1	1/7	wy	-17	self-employ	/ed	P00086406
	epare	!		ROBERT		EPING					1	_	
US	e Onl	Firm's addre			VE W #A2						Firm's EIN	-	
				LAKE TE				043			Phone no.		
May	the IF	RS discuss the	s return with the	e preparer st	own above? ((see instruct	tions)	· · · ·		<u> </u>	<u> </u>		. Yes X No
BA	A For	Paperwork R	eduction Act	Notice, see	he separate	instruction	s.		TEE	A0101 11/0	8/13		Form 990 (2013)

Form		Mest African Vo				91-202888	9 Page 2
Par	, ,	ent of Program Se					
				any line in this Part I	<u> </u>	<u></u>	
1	-	the organization's mission					
		g vocational so					
	economic_	development_pro	grams_in_We	<u>est_Africa</u>			
2	Did the organiza	ation undertake any sign	ficant program ser	vices during the year	which were not listed on t	he prior	
_	-					П	Yes X No
	If 'Yes,' describe	these new services on	Schedule O.			لبا	الديا
3	Did the organiza	ation cease conducting, o	or make significant	changes in how it co	nducts, any program servi	ces?	Yes X No
	If 'Yes,' describe	these changes on Scho	edule O.				_
4	Section 501(c)(3	ganization's program ser 3) and 501(c)(4) organiza expenses, and revenue,	ations and section	4947(a)(1) trusts are	ee largest program service required to report the amoded.	es, as measured by e ount of grants and allo	xpenses. cations to
4 a	(Code) (Expenses \$	98,534.	including grants of	\$ 78,729.) (Revenue \$	0.)
	We provid	e funding and s	support for	a vocational	school in Canc	hungo, Guinea	a-Bissau.
	The school	l teaches resid	lents skills	in five sub	jects: Auto Mech	anics, Comput	er basics,
					anted \$78,729.		
	<u>it purcha</u>	sed \$19,806 in	supplies_ti	hat were ship	ped to the scho	<u>ol.</u>	
							
4 b	(Code:) (Expenses \$, <u> </u>	ıncluding grants of	\$) (Revenue \$)
				. 			
			. 				
						· -	
4 c	(Code) (Expenses \$		including grants of	\$) (Revenue \$)
	•			. 50	·	·	
				· 			
							
							
				· ·			
				· -			
4 d	Other program	services. (Describe in Sc	hedule O.)	·			
		\$	including grant	s of \$) (Revenue	\$)
	Total program	service expenses 🕨	98	,534.			
BAA				TEEA0102 07/02/13			Form 990 (2013)

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х 1 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Х 3 Х 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 Х 5 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, 6 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If Yes, complete Schedule D, Part II 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Х 8 X 9 Х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If Yes,' complete Schedule Х b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total Х 11 b 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 Х 11 c 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 Х 11 d e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D. Part X. . . . 11 e Х 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 . . . Х 111 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional X 12 b Is the organization a school described in section 170(b)(1)(A)(ii)? If Yes, 'complete Schedule E. . . . X 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b Х 15 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If Yes, complete Schedule G, Part I (see instructions) Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Χ 19 X 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20

20 b

Form 990 (2013) West African Vocational Schools (WAVS)

Part IV | Checklist of Required Schedules (continued)

-			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If Yes, 'answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25a	24a		х
ı	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
•	I Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		Х
ŧ	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L. Part I	25b		х
	,	238		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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		-		
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		J
	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		х
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	20		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	30 31		X
-	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete	3,		
32	Schedule N, Part II	32	ļ	Х
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		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	olf '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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If Yes, 'complete Schedule R, Part V, line 2	36		х
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		х
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	х	

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Form 990 (2013)

form 990 (2013) West African Vocational Schools (WAVS) 91-2028889	,	P	age
Part V Statements Regarding Other IRS Filings and Tax Compliance			_
Check if Schedule O contains a response or note to any line in this Part V	•••	· · · ·	بلن
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	.		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ĺ
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
2 a 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			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			-
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b If Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O · · · · · · · · · · · · · · · · · ·	3 b		
·			
4 a 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)?	4 a		Х
b If Yes,' enter the name of the foreign country:		!	1
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 Ь		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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?	6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
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?	7 a	,	X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7Ь		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		х
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?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	ات		
Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9Ь		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12	į l		l
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	i i		
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?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12 b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			1
a Is the organization licensed to issue qualified health plans in more than one state?	13a		1
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?	14a		X
b If Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b	_	

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. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 0 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents χ X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b X stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8 a Χ Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10a Χ 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?.............. 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12 c 13 13 Did the organization have a written whistleblower policy? Х Х 14 15 Did the process for determining compensation of the following persons include a review and approval by independent 18 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a Х 15 b X 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 16a X b if 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16 t Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Washington Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Other (explain in Schedule O) Own website Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 1901 Fulton Street #108 Fresno 93721 (206) 552-8151 Hibo Jirde

Form 990 (2013) West African Vo	cation	al S	cho	ool	s	(WAV)	'S)		91-2028	889 Page 7
Part VII Compensation of Officers	s, Direct							nployees, Highes	t Compensated E	mployees, and
Independent Contractors Check if Schedule O contains a re		note 1	o an	w lin	o in	thic P	art \	///		П
Section A. Officers, Directors, Tru										
1 a Complete this table for all persons required							_			
organization's tax year.										_ 4
 List all of the organization's current offic compensation. Enter -0- in columns (D), (E), a 								uals or organizations),	regardless of amount of	OT .
List all of the organization's current key		•				•		definition of 'key emplo	yee.'	
 List the organization's five current higher who received reportable compensation (Box 5 organization and any related organizations. 	est compen	sated	emp	oloye	es	(other	than	an officer, director, tru	stee, or key employee)
List all of the organization's former office							mpe	nsated employees who	o received more than \$	100,000
of reportable compensation from the organization		-						ananhi ao a farmar dir	enster or trustee of the	
• List all of the organization's former dire- organization, more than \$10,000 of reportable										
List persons in the following order: individual to employees; and former such persons.	rustees or	directo	ors; i	nstitu	utio	nal tru	stee	s; officers; key employe	ees; highest compensa	ited
Check this box if neither the organization is	nor any rela	ated o	rgan			ompe	nsat	ed any current officer,	director, or trustee.	
				(C	;)					
(A) Name and Title		Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related	or d	क्र	Officer	ē	E T	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	organiza- tions	dividual :	nstitutional	Q.	emp	Highest co employee	[픁			and related organizations
	below dotted	Individual trustee or director	ᆲ		employee	Highest compensated employee				_
	line)	stee	trustee		æ)ensc				
			8			<u>g</u>				
_(1) Martha Reynolds	5.00					ļ				
Secretary				X			_	0.	0.	0.
(2) Gerald van Belle	3.00	ł				1				0
President (3) Curthia Paharta	5.00	-	-	Х		-		0.	0.	0.
_(3) Cynthia Roberts Treasurer	1-2.00	1		x		Ì		0.	0.	0.
(4) Dale Boyce	3.00									
Board member	1	x	}					0.	0.	0.
(5) Chris Collins	50.00									
Executive Director			L		Х		ļ	42,500.	0.	0.
_(6) Richard Kagel	3.00	1								
Board member	1.0.00	Х				_		0.	0.	0.
_(7)_Tom_Zerkel	10.00	,,] :						0.	•
Board member (8)	<u> </u>	X	-				-	0.	0.	0.
						1				•
(9)										-
(10)										
(11)										
(12)									,	
(40)	1	$\overline{}$	$\overline{}$	т			1	Ť.	T -	

Part VII Section A. Officers, Directors, Trus	tees, l	Key	En	nplo	ye	es, a	anc	l Highest Con	pensated Empl	oyee	S (cont	inued)
	(B)			(0	•							
(A) Name and title	Average hours per	box	, unle	ss pe	more rson i	than or s both or/truste	an	(D) Reportable compensation from	(E) Reportable compensation from		(F) stimated int of oth	
	week (list any hours for related organiza - tions	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	com fr orga an	pensatio om the anization d related anization	a n 1
	below dotted line)	ıstee	rustæ		8	pensated						
(15)												
(16)												
(17)												
(18)								. !				
(19)												
(20)		1										·····
(21)										~~ ~~ L		
(22)				-								
(23)												
(24)												
(25)											,,	
1 b Sub-total			• •	٠.	• •	•	•	42,500.	0.			0.
c Total from continuation sheets to Part VII, Section							•					
d Total (add lines 1b and 1c)							ived	42,500. I more than \$100.0	0.	pensa	tion	0.
from the organization				,						,		
3 Did the organization list any former officer, director, or	r truetos	, ka	/ OFT	nlov	00	or bud	hoc	t componented or	aniovoo	_	Yes	No
on line 1a? If Yes,' complete Schedule J for such indi	vidual			···				·······	· · · · · · · · · · · · · · · · · · ·	. 3		X
4 For any individual listed on line 1a, is the sum of repo the organization and related organizations greater that such individual	ın \$150,	000?	nsat If 'Y	tion : 'es' (and com	other olete	Sch	npensation from nedule J for		. 4		X
5 Did any person listed on line 1a receive or accrue cor for services rendered to the organization? If 'Yes,' cor	npensati	on fr	om :	any (unre	lated	org	anization or Individ	lual			X
Section B. Independent Contractors												
Complete this table for your five highest compensated compensation from the organization. Report compens	d indepe sation for	nden r the	t cor cale	ntrad	tors yea	that er end	rece ding	eived more than \$1 with or within the	100,000 of organization's tax yea	ar.		
(A) Name and business addres	s							(B) Description o		(Compe	C) ensatio	n
		-					_					
										-		
							\dashv	<u> </u>				
2 Total number of independent contractors (including be \$100,000 of compensation from the organization	ut not lim	nited	to th	iose	liste	d abo	ove)	who received mo	re than			
DAA												

	t IX Statement of Functional Expens				· - · · · · · · · · · · · · · · · · · ·
Sec	tion 501(c)(3) and 501(c)(4) organizations must con				
	· Check if Schedule O contains a res	·			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	98,534.	98,534.		
4 5	Benefits paid to or for members	42,500.	22,500.	17,000.	3,000.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	9,256.	4,900.	3,703.	653.
11	Fees for services (non-employees)		-1		
2	Management				
	Legal				
	Accounting	520.	0.	520.	
	Lobbying	520.1	U.	520.	0.
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	4 600		4 600	
g	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,677.	0.	4,677.	0.
12	Advertising and promotion				
13	Office expenses	362.	0.	362.	0.
14	Information technology				
15	Royalties				-
16	Occupancy				
17	Travel	8,187.	7,316.	871.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Fundraising Event Expenses	2,337.	0.	0	2,337.
	Bank & Money Transfer Fees	3,239	0.	3.239.	0.
	: WAVS_Expenses_in_Guinea-Bissau_	8.133.	8.133.	3,239.	0.
	Visitor's Fund Expenses	13,319.	13.319	0.1	0.
	All other expenses	3,957.	13,319,	3,957.	0.
	· F				
23	Total functional expenses. Add lines 1 through 24e	195,021.	154,702.	34,329.	5,990.
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)	i		i i	

Form 990 (2013) Page 11 West African Vocational Schools (WAVS) 91-2028889 Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 28,420 16,123. 2 2 3 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 instructions). Complete Part II of Schedule L 6 ASSETS 7 8 9 10 a 10 b 10 c 11 11 Investments - other securities. See Part IV, line 11 12 496,710 499,818. Investments - program-related. See Part IV, line 11 13 13 14 14 15 15 16 16 525,130 515,941 17 17 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 22 23 23 24 24 Other liabilities (including federal income tax, payables to related third parties, 25 and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . 25 26 Total liabilities. Add lines 17 through 25 0 26 a ZET Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34. Unrestricted net assets....... 27 27 28 28

BAA

29

30

31

33

34

R

FUZD

BALANCES 32

515,941. Form 990 (2013)

16,123.

499,818.

515,941.

29

30

31

32

33

34

28,420

496,710

525,130

525,130

Retained earnings, endowment, accumulated income, or other funds

Organizations that do not follow SFAS 117 (ASC 958), check here > X

Capital stock or trust principal, or current funds

and complete lines 30 through 34.

Form	990 (2013) West African Vocational Schools (WAVS) 91	-2028889		Ра	ige 12
Раг					
	Check if Schedule O contains a response or note to any line in this Part XI				. 🔢
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	85 , 8	32.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	95,0	21.
3	Revenue less expenses. Subtract line 2 from line 1 · · · · · · · · · · · · · · · · · ·	3		-9 <u>,</u> 1	89.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5	25,1	30.
5	Net unrealized gains (losses) on investments	5			
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B)).	10	5	15,9	<u> 941.</u>
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				$\cdot \square$
				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.			`	
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on separate basis, consolidated basis, or both:	а	1	,	ď
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 Ь		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate				
	basis, consolidated basis, or both:		, ,	, ,	
	Separate basis Consolidated basis Both consolidated and separate basis			٠	LI
C	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aureview, or compilation of its financial statements and selection of an independent accountant?	idit, 	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			, ,	
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e 	3 a		х
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		
BAA		-	Form	990 (2013)

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.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2013

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer Identification number

West	African Vocati	lonal Schools	(WAVS)					91-20	28889	•	
Part	I Reason for Pub	lic Charity Status	(All organizations r	must co	omplete	e this p	art.) S	ee inst	ruction	s.	
he or	ganization is not a private	foundation because it	is (For lines 1 through 1	11, checl	k only or	e box.)					
1	A church, convention	of churches or associa	tion of churches describ	ed in sec	tion 17	0(b)(1)(A	\)(i).				
2	A school described in	section 170(b)(1)(A)(ii). (Attach Schedule E.)								
3	A hospital or a cooper	rative hospital service	organization described in	section	170(b)((1)(A) (iii)					
4	A medical research or	rganization operated in	conjunction with a hosp	ital desci	ribed in s	section '	170(b)(1)(A)(iii).	Enter th	e hospital's	
	name, city, and state:										
5	An organization opera	ated for the benefit of a mplete Part II.)	college or university own	ned or o	perated	by a gov	emment	tal unit de	escribed	in section	
6	A federal, state, or loc	al government or gove	emmental unit described	ın sectio	on 170(b)(1)(A)(\	/).				
7		iormally receives a sub A)(vi). (Complete Part	estantial part of its suppo II.)	rt from a	governr	nental ur	nt or fro	m the ge	neral pu	blic describ	ed
8	A community trust de:	scribed in section 170	(b)(1)(A)(vi). (Complete	Part II.)							
9	from activities related investment income ar	to its exempt functions	nore than 33-1/3% of its s — subject to certain exc axable income (less sec aplete Part III.)	ceptions,	and (2)	no more	than 33	1-1/3% of	its supp	ort from gro	oss
10	An organization organ	nized and operated exc	dusively to test for public	safety.	See sec f	tion 509	(a)(4).				
11	more publicly support	ed organizations descr	dusively for the benefit of abed in section 509(a)(1) In and complete lines 116	or section	on 509(a	functions i)(2). See	of, or c e sectio	arry out i n 509(a)	the purpo (3). Che	oses of one ck the box t	or hat
	a ∏Type I b	Type II c	Type III - Function	ally integ	rated	c	ı 🗍 1	Type III -	- Non-fu	nctionally in	tegrated
e	By checking this box, other than foundation section 509(a)(2).	I certify that the organi managers and other th	ization is not controlled d nan one or more publicly	lirectly or supporte	ndirect ed organ	ly by one izations	or mor describe	e disqua ed in sec	lified per tion 509	rsons (a)(1) or	
f		eived a written determ	ination from the IRS that	is a Typ	e I, Type	ell or Ty	pe III su	pporting	organiza	ation,	🛚
g	Since August 17, 200	6, has the organization	accepted any gift or co	ntributio	n from a	ny of the	followin	g persor	ıs?		
											Yes No
	below, the gove	ming body of the supp	trols, either alone or toge orted organization?							11 g (i)	
	(ii) A family membe	er of a person describe	d ın (i) above?							. 11 g (ii)	
	(iii) A 35% controlle	ed entity of a person de	scnbed in (i) or (ii) above	в?						· 11 g (iii)	
h	Provide the following	information about the s	supported organization(s).						,	<u> </u>
	(I) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) la organiza column (i) your go docur	etion in) listed in verning	(v) Did you the organic column (i) supp	etion in of your	(vi) Is organiza colum organizac U S	ition in n (i) i in the		t of monetary port
		,		Yes	No	Yes	No	Yes	No		
A)											
B)											<u>. </u>
C)	 	<u> </u>		<u> </u>							
D)											
E)				-		 	<u> </u>				
otal											

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

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

Sec	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
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						
Sec	tion B. Total Support			· · · · · · · · · · · · · · · · · · ·			
	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
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	Total support. Add lines 7 through 10						
12	Gross receipts from related activiti	es, etc (see instruc	ctions)			12	
13	First five years. If the Form 990 is organization, check this box and s	s for the organizate top here	on's first, second,	third, fourth, or fifth	n tax year as a sect	ion 501(c)(3)	▶ ∏
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 2013						%
15	Public support percentage from 20						%_
16a	33-1/3% support test – 2013. If and stop here. The organization of	the organization di jualifies as a public	d not check the bo ly supported orga	ox on line 13, and t nızation	he line 14 ıs 33-1/3	% or more, check th	nis box
b	b 33-1/3% support test — 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17 a	10%-facts-and-circumstances te or more, and if the organization me the organization meets the facts-a	eets the 'facts-and-	-circumstances' te:	st, check this box a	and stop here. Exp	lain in Part IV how	▶□
	10%-facts-and-circumstances te or more, and if the organization me organization meets the 'facts-and-	eets the 'facts-and- circumstances' tes	circumstances' te: t. The organization	st, check this box a n qualifies as a pub	and stop here. Exp plicly supported org	lain in Part IV how t anızatıon	he ····▶ □
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or	17b, check this box	and see instruction	s ▶ [
BAA					Sch	edule A (Form 99)	ar 000 EZ\ 2012

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

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

Sec	ion A. Public Support					····	·
	lar year (or fiscal yr beginning in) >	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include		46 515	02 027	104 333	146 706	370 673
2	any 'unusùal grants.')		46,515.	82,037.	104,323.	146,798	379,673.
-	sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's						
3	tax-exempt purpose						
4	Tax revenues levied for the organization's benefit and either paid to or expended on						
5	Its behalf						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons		46,515.	82,037.	104,323.	146,798	379,673.
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.						
C	Add lines 7a and 7b		<u></u>				
	Public support (Subtract line 7c from line 6.)						379,673.
	tion B. Total Support	 					
	far year (or fiscal yr beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6		46,515.	82,037.	104,323.	146,798	379,673.
	dividends, payments received on securities loans, rents, royalties and income from similar sources		42,556.	29,028.	45,876.	32,785	150,245.
Ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b		42,556.	29,028.	45,876.	32,785	150,245.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		3,835.	8,794.			12,629.
13	Total Support. (Add ins 9 10c, 11 and 12)		92,906.	119,859.	150,199.	179,583	
14	First five years. If the Form 990 is organization, check this box and s	for the organization top here					
Sec	tion C. Computation of Pu						
15	Public support percentage for 2013		•				5 69.98 %
16	Public support percentage from 20)12 Schedule A, Pa	rt III, line 15	<u> </u>		1	6 64.16 %
	tion D. Computation of Inv						
17	Investment income percentage for				•	<u> </u>	
18	Investment income percentage fro					L	32.30 -
	33-1/3% support tests - 2013. If is not more than 33-1/3%, check the	his box and stop h e	ere. The organization	on qualifies as a p	ublidy supported o	organization	· · · · · · · ▶ [X]
	33-1/3% support tests — 2012. If line 18 is not more than 33-1/3%, (check this box and	stop here. The org	anızatıon qualifies	s as a publicly supp	oorted organiza	tion · · · · · ►
20	Private foundation. If the organize	ation did not check	a box on line 14, 1		this box and see ir	nstructions	

Scriedule A (Gill 990 di 990-E2/2013 West African Vocational Schools (WAVS) 91-202009 Fage 4
	Supplemental Information. 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).
Pt_III_L	ine 12: Description: School Tuition
<u>Pt_III_L</u>	ine 12: 2010: 3549.
<u>Pt_III_L</u>	ine 12: 2011: 8794.
<u>Pt_III_</u> L	ine 12: Description: Auto Maintenance & Repair
<u>Pt_III_L</u>	ine 12: 2010: 286.

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047 2013

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

n990. Open to Public Inspection
Employer identification number

West Afric	an Vocational Schools (WAVICI			91-2028889
Part Orga	nizations Maintaining Donor	Advised Funds or Ot	her Similar Fund	s or Ac	
Com	plete if the organization answe	red 'Yes' to Form 990, I	Part IV, line 6.		
		(a) Donor advised	funds	(b) f	unds and other accounts
1 Total number	eratend of year				· · · · · · · · · · · · · · · · · · ·
	contributions to (during year)				
	rants from (during year)	•			
	alue at end of year				
5 Did the orga	inization inform all donors and donor a inization's property, subject to the orga	dvisors in writing that the ass	ets held in donor adv	sed funds	Yes
6 Did the orga for charitabl impermissib	inization inform all grantees, donors, a e purposes and not for the benefit of the le private benefit?	nd donor advisors in writing the donor or donor advisor, or	hat grant funds can be for any other purpose	e used only conferring	y] Yes
	servation Easements. plete if the organization answe	red 'Yes' to Form 990, I	Part IV, line 7.		
1 Purpose(s)	of conservation easements held by the	organization (check all that	apply).		
Preserv	ation of land for public use (e.g., recre	ation or education)	Preservation of a	n historica	lly important land area
Protecti	on of natural habitat		Preservation of a	certified h	istoric structure
Preserv	ation of open space				
	nes 2a through 2d if the organization h	eld a qualified conservation o	ontribution in the form	of a cons	ervation easement on the
last day of the	ne tax year.				
					Held at the End of the Tax
	er of conservation easements			2 a	
	ge restricted by conservation easemen			2 b	
c Number of	conservation easements on a certified	historic structure included in	(a)	2 c	
d Number of o structure list	conservation easements included in (c) led in the National Register) acquired after 8/17/06, and	not on a historic	2 d	
3 Number of o tax year ►	conservation easements modified, tran	sferred, released, extinguish	ed, or terminated by th	ne organiza	ation during the
Number of s	states where property subject to conse	rvation easement is located 1	•		
	ganization have a written policy regard ment of the conservation easements it				
6 Staff and vo	lunteer hours devoted to monitoring, in	nspecting, and enforcing cons	servation easements (during the	year
7 Amount of €	expenses incurred in monitoring, inspen	cting, and enforcing conserva	tion easements durin	g the year	
8 Does each and section	conservation easement reported on lin 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requ	rements of section 17	0(h)(4)(B)	(i) · · · · · . [] Yes
include, if a	describe how the organization reports oplicable, the text of the footnote to the neasements.	conservation easements in it e organization's financial state	s revenue and expen- ements that describes	se stateme the organi	ent, and balance sheet, and ization's accounting for
art III Orga	inizations Maintaining Collect plete if the organization answe	tions of Art, Historica red 'Yes' to Form 990, I	I Treasures, or CP art IV, line 8.	Other Si	milar Assets.
1 a If the organi art, historica	zation elected, as permitted under SF, il treasures, or other similar assets hel the text of the footnote to its financial s	AS 116 (ASC 958), not to rep	ort in its revenue state		
historical tre	zation elected, as permitted under SF, assures, or other similar assets held fo nounts relating to these items:				
_	es included in Form 990, Part VIII, line	1			▶\$
	included in Form 990, Part X				
2 If the organi	zation received or held works of art, hi quired to be reported under SFAS 116	storical treasures, or other si	milar assets for financ		
a Revenues i	ncluded in Form 990, Part VIII, line 1				▶\$
h Assets inch	ded in Form 990. Part X				► ¢

Scredule D (1 orill 330) 2013 WeSt	<u>Mirican vocat</u>	Toual School	IS (WAVS)	91-2	202009		raye 4
Part III Organizations Maintal	ning Collections	of Art, Histori	cal Treasures, or	Other Similar	Assets (c	ontinu	ed)
3 Using the organization's acquisition items (check all that apply):	, accession, and othe	r records, check an	y of the following that a	e a significant use	of its collect	ion	
a Public exhibition		d Loan or e	exchange programs				
b Scholarly research		e Other					
c Preservation for future generati	ons	_					
4 Provide a description of the organiz Part XIII.	ation's collections and	d explain how they t	further the organization?	s exempt purpose i	n		
5 During the year, did the organizatio to be sold to raise funds rather than	n solicit or receive do to be maintained as	nations of art, histor part of the organiza	ical treasures, or other tion's collection?	similar assets	Yes		No
Part IV Escrow and Custodial line 9, or reported an ar	Arrangements. nount on Form 99	Complete if the 30, Part X, line 2	organization answ 21.	ered 'Yes' to Fo	orm 990, F	≥art IV	•
1 a Is the organization an agent, trusted on Form 990, Part X?				ts not included	Yes		No
b If 'Yes,' explain the arrangement in	Part XIII and complete	e the following table).		Amoun	<u></u> t	
c Beginning balance				1c		 -	
d Additions during the year							
e Distributions during the year							
f Ending balance							
2 a Did the organization include an amo					· · Yes		No
b If Yes,' explain the arrangement in		•			ш	[
Part V. Endowment Funds. C	omplete if the org	anization answe	· ;				
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years b		Four years	s back
1 a Beginning of year balance	496,828.	496,828	513,545	470,9	89.		
b Contributions							
c Net investment earnings, gains, and losses	32,785.		29,028	. 49,3	48.		
d Grants or scholarships							
e Other expenditures for facilities and programs	25,000.		40,000	. 1,2	00.		
f Administrative expenses	4,677.		5,745	. 5,5	92.		
g End of year balance	499,936.					-	
g End of year balance 499, 936. 496, 828. 496, 828. 513, 545. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:							
a Board designated or quasi-endown	-	9	(-),				
b Permanent endowment ►	9						
c Temporarily restricted endowment		ą					
The percentages in lines 2a, 2b, an		_					
3 a Are there endowment funds not in to organization by:	he possession of the	organization that ar	e held and administered	for the	ſ	Yes	No
(i) unrelated organizations					3a(i)		X
(ii) related organizations							X
b If 'Yes' to 3a(II), are the related orga							 ^
` ' '		•					Щ
4 Describe in Part XIII the intended u		ms endowniem ium	18.	· · · · · · · · · · · · · · · · · · · ·			
Part VI Land, Buildings, and I Complete if the organiz	•	es' to Form 99), Part IV, line 11a.	See Form 990	, Part X, li	ine 10.	
Description of property		or other basis vestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	ılue
1 a Land							
b Buildings							
c Leasehold improvements							
d Equipment							
e Other					\neg		
Total. Add lines 1a through 1e. (Column		990. Part X. column	(B), line 10(c).)		<u> </u>		
PAA	(a) muoi oquai i oimi	ooo, rait A, Goidilli	(-), (0(0).)		chedule D (F	-orm 00/	0) 2013

Part VII	Investments – Other Securities. Complete if the organization answered "		art IV line 11h See Form 990 F	Part X line 12
(a) Desc	explion of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-o	
	al derivatives	499,818.		
• •	-held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D) (E)				
(F)				······································
(G)				
(H)				
(1)				
Total. (Colun	nn (b) must equal Form 990, Part X, column (B) line 12)	499,818.		
Part VIII	Investments — Program Related. Complete if the organization answered	Yes' to Form 990. P	art IV. line 11c. See Form 990. F	Part X. line 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
_(4)				······································
(5)				
<u>(6)</u> (7)				
(8)				····
(9)				
(10)				
	nn (b) must equal Form 990, Part X, column (B) line 13)			
Part IX	Other Assets. Complete if the organization answered '	Yes' to Form 990. F	Part IV. line 11d. See Form 990, F	Part X, line 15.
		scription		(b) Book value
(1)				
(2)				
(3)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
Total. (Co	olumn (b) must equal Form 990, Part X, column (B),	line 15)		
Part X	Other Liabilities.	000 Dard N/ Ha - 4:	1 116 C - F 000 D-4 V line 2F	
	Complete if the organization answered 'Yes' to F (a) Description of liability	(b) Book value	1e or 111. See Form 990, Part X, line 25	
(1) Fede	eral income taxes	(b) Book value		
(2)				
(3)				
(4)				
(5)				
(7)				
(8)				
(9)			_	
(10)				
(11)	mn (b) must equal Form 990, Part X, column (B) line 25)			
	runcertain lax positions in Part XIII, provide the text of the foo		incial statements that reports the organization's lia	bility for uncertain
	under FIN 48 (ASC 740) Check here if the text of the footnote			´ 🛮
BAA		TEEA3303 10/02/13	Sche	edule D (Form 990) 2013

Schedule D (Form 990) 201	l3 West	African	Vocational	Schools	(WAVS)	91-2028889	Page 5
Schedule D (Form 990) 201	ntal Inforn	nation (con	ntinued)				
					· · · · ·		
•							
						 -	

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions. ► Information about Schedule F (Form 990) and its instructions is

OMB No. 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

at www.irs.gov/form990. Name of the organization **Employer identification number** 91-2028889 West African Vocational Schools (WAVS) Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (b) Number of (d) Activities conducted in (e) If activity listed in (f) Total (a) Region employees, region (by type) (e.g., offices in the (d) is a program expenditures for service, describe region agents, and fundraising, program and investments independent services, investments, specific type of in region contractors grants to recipients service(s) in region in region located in the region) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11)(12)(13)(14)(15)(16)(17)3 a Sub-total **b** Total from continuation sheets to Part I

C Totals (add lines 3a and 3b)

Schedule F (Form 990) 2013 West African Vocational Schools (WAVS)

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(3)			Middle East	Vocational Ed	98,534.	Moneygram	o de la companya de l		
(2)									
(3)									
€								:	
(2)									
(9)									
E									
(8)									
(6)									
(10)									
(11)									
(12)									
(13)									
(4)									
(15)									
(16)									
	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	ions listed above that a sction 501(c)(3) equiva	are recognized as chalency letter	arrties by the forei	gn country, recogni	zed as tax-exempt	by the IRS, or for w	hich	1
BAA Er	Enter total number of other organizations or entities	s or entitles						Schedule F	Schedule F (Form 990) 2013

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West African Vocational Schools (WAVS)

Schedule F (Form 990) 2013 West African Vocational Schools (WAVS)

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)			1				
(2)							
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							:
(15)							
(16)							
(17)							
(18)							
ВАА					-	Schedule F	Schedule F (Form 990) 2013

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6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	· · · · · · · · Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	· · · · · · · · · · Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	· · · · · Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		X No
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	· · · · · Tyes	X No
	Foreign Forms		
Sche	dule F (Form 990) 2013 West African Vocational Schools (WAVS)	91-2028889	Page 4

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. ► Attach to Form 990 or 990-EZ.

2013

Employer Identification number

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury internal Revenue Service Name of the organization

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

91-2028889 West African Vocational Schools (WAVS) Pt VI, Line 11b Form 990 is submitted to all Board Directors members at the regular scheduled meeting for review and corrections. It is then corrected as needed and sent to IRS. Pt VI, Line 19 These documents are available upon request. The request should be in writing and sent to PO Box 25455, Seattle, WA 98165. Pt VI, Line 8b There are no other committees with the authority to act on behalf of the governing body. Therefore there are no meetings to document.