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Short Form
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except private foundations)

OMB No. 1545 1150

2015

- 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.

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A For the 2015 calendar year, or tax year beginning	9/01	, 2015, and ending	8/31	, 2016
B Check if applicable				
<input type="checkbox"/> Address change	D Employer identification number			
<input type="checkbox"/> Name change	91-1154334			
<input type="checkbox"/> Initial return	E Telephone number			
<input type="checkbox"/> Final return/terminated	(360) 705-8988			
<input type="checkbox"/> Amended return	F Group Exemption Number			
<input type="checkbox"/> Application pending	►			
G Accounting Method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►				
I Website: ► N/A	H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)			
J Tax-exempt status (check only one) — <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(5) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
K Form of organization. <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other				
L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	► \$ 110,429.			

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

1 Contributions, gifts, grants, and similar amounts received	1
2 Program service revenue including government fees and contracts	2
3 Membership dues and assessments	3 110,397.
4 Investment income	4 32.
5a Gross amount from sale of assets other than inventory	5a
b Less cost or other basis and sales expenses	5b
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c
6 Gaming and fundraising events	
a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a
b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b
c Less direct expenses from gaming and fundraising events	6c
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d
7a Gross sales of inventory, less returns and allowances	7a
b Less cost of goods sold	7b
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
8 Other revenue (describe in Schedule O)	8
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9 110,429.
10 Grants and similar amounts paid (list in Schedule O)	10 2,250.
11 Benefits paid to or for members	11
12 Salaries, other compensation, and employee benefits	12
13 Professional fees and other payments to independent contractors	13 1,564.
14 Occupancy, rent, utilities, and maintenance	14 20,202.
15 Printing, publications, postage, and shipping	15
16 Other expenses (describe in Schedule O)	16 75,842.
17 Total expenses. Add lines 10 through 16	17 99,858.
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 10,571.
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 113,326.
20 Other changes in net assets or fund balances (explain in Schedule O)	20
21 Net assets or fund balances at end of year Combine lines 18 through 20	21 123,897.

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2015)

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part III.

Check if the organization used Schedule O to respond to any question in this part of the Form 990			
	(A) Beginning of year	(B) End of year	
22 Cash, savings, and investments	41,715.	22	53,255.
23 Land and buildings	71,611.	23	71,611.
24 Other assets (describe in Schedule O)		24	
25 Total assets	113,326.	25	124,866.
26 Total liabilities (describe in Schedule O)	0.	26	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	113,326.	27	124,866.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III.

What is the organization's primary exempt purpose?

What is the organization's primary exempt purpose? See Schedule C
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others.)

28 See Schedule O

(Grants \$) If this amount includes foreign grants, check here

29

(Grants \$-----) If this amount includes foreign grants, check here

30 Grants \$

Grants \$ _____ If this amount includes foreign grants, check here _____

31 Other programs

31 Other program services (describe in Schedule 3) If this amount includes foreign grants, check here

33. Total program a

32 Total program service expenses (add lines 28a through 31a)

Part IV List of C

Part IV List of Officers, Directors, Trustees, and Key Employees

(list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

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** X

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 change on Schedule O (see instructions) **34** X

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? **35a** X

b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O **35b**

c 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 **35c** X

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** X

37a Enter amount of political expenditures, direct or indirect, as described in the instructions **37a** 0. **b** Did the organization file Form 1120-POL for this year? **37b** X

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** X

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved **38b** N/A

39 Section 501(c)(7) organizations. Enter **39a** N/A **b** Initiation fees and capital contributions included on line 9 **39b** N/A

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► **N/A**, section 4912 ► **N/A**, section 4955 ► **N/A** **40b**

b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I **40c** 0.

c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 **40d** 0.

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization **40e** X

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 **40f**

41 List the states with which a copy of this return is filed ► **None**

42a The organization's books are in care of ► **Tim Voie** Telephone no ► **(360) 705-8988**
Located at ► **1619 State Street NE Olympia WA** ZIP + 4 ► **98506** **42b** X

b 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)? If 'Yes,' enter the name of the foreign country ► **42c** X

See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).

c At any time during the calendar year, did the organization maintain an office outside the U.S.? If 'Yes,' enter the name of the foreign country. ► **42d**

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► **43** N/A **43e** N/A

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** X

b 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** X

c Did the organization receive any payments for indoor tanning services during the year? **44c** X

d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O **44d**

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? **45a** X

b 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 Form 990-EZ (see instructions) **45b** X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	48	
49 a Did the organization make any transfers to an exempt non-charitable related organization?	49 a	
b If 'Yes,' was the related organization a section 527 organization?	49 b	
50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'		

f Total number of other employees paid over \$100,000

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	<input checked="" type="checkbox"/> <u>Tim Voie</u>	Signature of officer	<input checked="" type="checkbox"/> <u>1-13-17</u>	Date		
	<input checked="" type="checkbox"/> <u>Tim Voie</u>	Type or print name and title	President			
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature	Date	PTIN	
	<u>Sandra McClaflin, RTRP</u>		<u>Sandra McClaflin, RTRP</u>	<u>1/12/17</u>	Check <input type="checkbox"/> if self employed	<u>P00108747</u>
	Firm's name ► <u>McSwain and Company, PS</u>		Firm's EIN ► <u>91-1706316</u>			
Firm's address ► <u>612 Woodland Square Loop SE, Suite 300</u> <u>Lacey, WA 98503</u>						
				Phone no	<u>360-357-9304</u>	

May the IRS discuss this return with the preparer shown above? See instructions.

► Yes No

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545 0047

2015

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Name of the organization

Tumwater Education Association

Employer identification number

91-1154334

Form 990-EZ, Part I, Line 16
Other Expenses

Conferences, Conventions, and Meetings	\$ 10,366.
Depreciation	969.
District Reimbursed Expenses	39,927.
Food for Meetings	2,120.
Gifts & Recognitions	1,250.
Licenses	10.
Miscellaneous	84.
Office Supplies	204.
Payments of Travel or Entertainment for Public Officials	2,692.
Stipends Paid	18,200.
Technology Services	20.
Total	\$ 75,842.

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

The mission of the Tumwater Education Association is to be a valuable resource and partner in our members' personal and professional growth, and in our efforts to improve teaching and learning in Tumwater's public schools.

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

The mission of the Tumwater Education Association is to be a valuable resource and partner in our members' personal and professional growth, and in our efforts to improve teaching and learning in Tumwater's public schools.